

Highly Confidential - Subject to Further Confidentiality Review

Page 1

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

- - - - - x

IN RE: NATIONAL : HON. DAN A.
PRESCRIPTION OPIATE POLSTER
LITIGATION : MDL NO. 2804
APPLIES TO ALL CASES : NO. 1:17-MD-2804

- - - - - x

HIGHLY CONFIDENTIAL
SUBJECT TO FURTHER CONFIDENTIALITY REVIEW

- - -

January, 17, 2019

- - -

Videotaped deposition of CARLA CARTWRIGHT,
taken pursuant to notice, held at the law offices of
O'Melveny & Myers, LLP, 1625 Eye Street, N.W.,
Washington, D.C., beginning at 9:14 a.m., before
Misty Klapper, Registered Merit Reporter, Certified
Realtime Reporter and Notary Public in and for the
District of Columbia.

1 APPEARANCES:

2 DAVID I. ACKERMAN, ESQUIRE
MOTLEY RICE LLC
3 401 9th Street, N.W.
Suite 1001
4 Washington, D.C. 20004
(202) 849-4962
5 Email: dackerman@motleyrice.com
COUNSEL FOR THE PLAINTIFFS

6
7 ROSS B. GALIN, ESQUIRE
DESIRAE KRISLIE C. TONGCO, ESQUIRE
8 O'MELVENY & MYERS LLP
Times Square Tower
9 7 Times Square
New York, New York 10036-6537
10 (212) 326-4307
Email: rgalin@omm.com
11 dtongco@omm.com
COUNSEL FOR THE DEFENDANTS JANSSEN,
12 JOHNSON & JOHNSON AND DEPONENT

13 TELEPHONIC APPEARANCES:

14 ANGEL TANG NAKAMURA, ESQUIRE
ARNOLD & PORTER KAYE SCHOLER, LLP
15 777 South Figueroa Street
44th Floor
16 Los Angeles, California 90017-5844
(213) 243-4094
17 Email: angel.nakamura@arnoldporter.com

18 and
19 ZENO HOUSTON, ESQUIRE
ARNOLD & PORTER KAYE SCHOLER, LLP
20 250 West 55th Street
New York, New York 10019-9710
21 (212) 836-7332
Email: zeno.houston@arnoldporter.com
22 COUNSEL FOR THE DEFENDANTS ENDO HEALTH
SOLUTIONS, ENDO PHARMACEUTICALS, INC. AND
23 PAR PHARMACEUTICAL COMPANIES, INC., f/k/a
PAR PHARMACEUTICAL HOLDINGS, INC.

24

1 TELEPHONIC APPEARANCES (CONTINUED):
2 SAMANTHA L. ROCCHINO, ESQUIRE
REED SMITH LLP
3 Three Logan Square
1717 Arch Street
4 Suite 3100
Philadelphia, Pennsylvania 19103
5 (215) 851-8262
Email: srocchino@reedsmith.com
6 COUNSEL FOR THE DEFENDANT
AMERISOURCEBERGEN
7
8 WEISS NUSRATY, ESQUIRE
COVINGTON & BURLING LLP
9 One CityCenter
850 Tenth Street, N.W.
10 Washington, D.C. 20001-4956
(202) 662-5703
11 Email: wnusraty@cov.com
COUNSEL FOR THE DEFENDANT MCKESSON
12 CORPORATION
13
14 SOFIA MCDONALD, LAW CLERK
ROPES & GRAY LLP
1211 Avenue of the Americas
15 New York, New York 10036
(212) 596-9182
16 Email: Sofia.McDonald@ropesgray.com
COUNSEL FOR THE DEFENDANT MALLINCKRODT
17 PHARMACEUTICALS
18
19 PAIGE E. ZIELINSKI, ESQUIRE
JONES DAY
555 California Street
20 26th Floor
San Francisco, California 94104
21 (415) 875-5788
Email: pzielinski@jonesday.com
22 COUNSEL FOR THE DEFENDANT WALMART
23
24

Highly Confidential - Subject to Further Confidentiality Review

Page 4

1 APPEARANCES (CONTINUED):

2 ALSO PRESENT:

3 JENNA FORSTER, MOTLEY RICE, LLP
4 RAY MOORE, VIDEOGRAPHER
5
6
7
8

4

5

6

7

8

9

C O N T E N T S

10 WITNESS: EXAMINATION BY: PAGE:

11 Carla Cartwright Mr. Ackerman 7

12 Mr. Galin 136
13
14
15

13

14

15

16

E X H I B I T S

17 NO.: DESCRIPTION: PAGE:

18 J&J

Cartwright-1 Plaintiffs' Amended Notice
19 of Oral Videotaped 30(b)6
Deposition of Carla Cartwright 23
20

20

J&J

21 Cartwright-2 CS/Pain State Issues, 7/21/11,
Bates No. JAN-MS-00393142 52
22
23
24

22

23

24

Highly Confidential - Subject to Further Confidentiality Review

Page 5

1	E X H I B I T S (continued):		
2	NO.:	DESCRIPTION:	PAGE:
3	Janssen		
4	Cartwright-3	E-mail chain dated 1/25/12, Subjects: Position on PDMP Programs and 2012 Pain Meetings, Bates Nos. JAN-MS-00943201 through JAN-MS-00943204	61
7	Janssen		
8	Cartwright-4	E-mail, Thomson to Focella, dated 2/1/02, Subject: A day at the VA spa, Bates No. JAN-MS-00492411	74
10	Janssen		
11	Cartwright-5	Draft Nucynta 2011 Business Plan, Advocacy Initiatives, Bates No. JAN-MS-00409840	80
12	Janssen		
13	Cartwright-6	Advocacy/Quality/Policy/ Budget, Bates No. JAN-MS-00874627	84
15	Janssen		
16	Cartwright-7	Nucynta Pharmacy Stocking National Manager's Meeting December 2010 Pharmacy Plan, Bates No. JAN-MS-00339015	88
18	Janssen		
19	Cartwright-8	E-mail from Moskovitz to Vorsanger, dated 12/8/00 Subject: JCAHO Pain Management, Jean Gillespie and Minutes and information from 10/19 call, Bates Nos. JAN-MS-00654707 through JAN-MS-00654711	94
23			
24			

Highly Confidential - Subject to Further Confidentiality Review

Page 6

1		E X H I B I T S (continued):	
2	NO.:	DESCRIPTION:	PAGE:
3	Janssen		
4	Cartwright-9	Janssen Pharmaceutica Research Foundation Record of FDA Contact re: Duragesic, dated 9/15/00, Bates Nos. JAN-MS-00479781 through JAN-MS-00479783	106
5			
6			
7	Janssen		
8	Cartwright-10	Janssen Research Foundation Record of FDA Contact re: Duragesic, dated 12/18/00, Bates No. JAN-MS-480543	109
9			
10	Janssen		
11	Cartwright-11	Defendants Johnson & Johnson, Janssen Pharmaceuticals, Inc., Ortho-McNeil-Janssen Pharmaceuticals, Inc. and Janssen Pharmaceutica, Inc. Objections to Topics in Plaintiffs' Notice of Videotaped 30(b)6 Depositions	116
12			
13			
14			
15	Janssen		
16	Cartwright-12	E-mail, Singh to Kenny, et al., dated 11/19/10, Subject: SCG Managed Markets Conference Call Recap, Bates Nos. JAN-MS-03000683 through JAN-MS-03000684	119
17			
18			
19	Janssen		
20	Cartwright-13	E-mail chain between Deem-Eshleman and Wickey, March 2011, Subject: Prescribe Responsibly, Bates Nos. JAN-MS-00940860 through JAN-MS-00940861	131
21			
22			
23			
24			

1 P R O C E E D I N G S

2 VIDEO OPERATOR: We are now on
3 the record. My name is Ray Moore. I am a
4 videographer for Golkow -- Golkow Litigation
5 Services. Today's date is January 17, 2019,
6 and the time is 9:14 a.m.

7 This video deposition is being
8 held in Washington, D.C. in the matter In Re:
9 National Prescription Opiate Litigation for
10 the United States District Court for the
11 Northern District of Ohio, Eastern Division,
12 MDL Number 2804.

13 The deponent is Carla
14 Cartwright. Counsel will be noted on the
15 stenographic record. The court reporter is
16 Misty Klapper and may now swear in the
17 witness.

18 Whereupon:

19 CARLA CARTWRIGHT,
20 was called for examination, and, after being duly
21 sworn, was examined and testified as follows:

22 EXAMINATION BY COUNSEL FOR PLAINTIFFS

23 BY MR. ACKERMAN:

24 Q. Good morning, Ms. Cartwright.

1 We met off the record, but I am David Ackerman
2 of Motley Rice, and I'm representing the
3 plaintiffs in this action, plaintiffs'
4 executive committee and a couple of the
5 Track 1 bellwether plaintiffs.

6 Have you ever had your
7 deposition taken before?

8 A. I have not.

9 Q. All right. Well, this one
10 hopefully won't -- won't go too long, but let
11 me just explain what's going to happen. I'm
12 sure your counsel has as well.

13 So as you can see, we have a
14 court reporter here who is probably the most
15 talented person in the room, and she is
16 writing down everything that is said or -- or
17 typing down everything that is said.

18 I'll be asking questions. You,
19 hopefully, will be giving answers. As
20 talented as the court reporter is, she can't
21 type when we speak over each other. So the
22 first thing I ask is even though it may be
23 painfully obvious where my question is going,
24 try to let me finish the question before you

1 start your answer, just so the record is
2 clean. And, similarly, I will try not to cut
3 off any of your answers; I will wait for you
4 to finish your answer before starting a -- a
5 new question. If I do cut off one of your
6 answers, please let me know.

7 Also -- and I noticed that you
8 just nodded your head -- although we are on
9 video, the -- the court reporter has to -- has
10 to write down verbal signals. So if you can
11 answer with yes or no instead of nods or
12 shakes of the head -- or even um-hmm or uh-hum
13 can sometimes be difficult to figure out on a
14 transcript -- that would be helpful. So
15 please try to answer yes or no.

16 A. Yes.

17 Q. All right.

18 A. I will do so.

19 Q. Sure. Thank you.

20 If at any time you don't
21 understand a question that I ask, please let
22 me know and I'll try to explain it. If you do
23 answer a question, I will assume that you
24 understood the question.

1 A. Yes.

2 Q. All right.

3 MR. GALIN: Mr. Ackerman, just
4 before you start, just to be helpful to get a
5 roll call of who's on the phone, just so I
6 know who's on the phone today. I mean, there
7 are people who are dialed in.

8 MR. ACKERMAN: Yeah. I think
9 the -- the court reporter has that list.

10 MR. GALIN: Oh, okay.

11 MR. ACKERMAN: I -- I don't
12 necessarily want to do that on the record.

13 MR. GALIN: That's fine, so long
14 as I can get that list.

15 MR. ACKERMAN: I believe there
16 are four or five attorneys.

17 MR. GALIN: Okay.

18 BY MR. ACKERMAN:

19 Q. Any other ground rules. If at
20 any time you want to clarify an answer that
21 you gave earlier or provide additional
22 information, just let me know and I'll give
23 you the opportunity to do that.

24 A. Thank you.

1 Q. We won't be going very long
2 today, but if you do -- if you would like to
3 take a break, let us know and we can take a
4 break. I'd just ask that we not take a break
5 while a question is pending.

6 A. Thank you. I can do that.

7 Q. Sure. Have you taken any
8 substance or medicine today that would affect
9 your ability to testify truthfully?

10 A. I have not.

11 Q. All right. Are you currently
12 employed?

13 A. I am.

14 Q. And -- and I paused only because
15 I wasn't sure of the entity who employed you,
16 so that's my next question.

17 A. Oh.

18 Q. By whom are you employed?

19 A. Johnson & Johnson.

20 Q. Okay. And what is your job
21 title?

22 A. Director, global regulatory
23 affairs. Sorry. Director, global regulatory
24 policy.

Highly Confidential - Subject to Further Confidentiality Review

Page 12

1 MS. ZIELINSKI: Can we go off
2 the record really quick? I'm having a very
3 difficult time hearing the witness. Is it
4 possible to move the phone closer?

5 MR. ACKERMAN: Yeah. Let's go
6 off the record for a minute and we'll try to
7 fix that.

8 VIDEO OPERATOR: The time is now
9 9:18 a.m. We're going off the record.

10 (Thereupon, a brief recess was
11 taken.)

12 VIDEO OPERATOR: The time is now
13 9:20 a.m. We're back on the record.

14 BY MR. ACKERMAN:

15 Q. Okay. We'll do our best to
16 speak up so that everyone on the phone can
17 hear as well.

18 Before the break you mentioned
19 that your current position is director of
20 global regulatory affairs; is that correct?

21 A. I misspoke. It's director,
22 global regulatory policy.

23 Q. Got it, regulatory policy.

24 And how long have you held that

1 position?

2 A. Since October of 2018.

3 Q. When did you join
4 Johnson & Johnson?

5 A. The fall of 2012.

6 Q. Okay. So what positions have
7 you -- did you hold -- what position did you
8 hold at Johnson & Johnson prior to being
9 director of global regulatory policy?

10 A. Immediately prior I was a
11 director in federal affairs within the
12 government affairs and policy group.

13 Q. And for how long did you hold
14 that position?

15 A. Approximately two years.

16 Q. And prior to being director of
17 federal affairs, what position did you hold?

18 A. I was a director of global
19 regulatory policy and intelligence within our
20 pharmaceutical sector.

21 Q. Okay. And for how long did you
22 hold that position?

23 A. Approximately four years.

24 Q. Was that the position you began

1 in when you joined Johnson & Johnson?

2 A. It was.

3 Q. Prior to joining

4 Johnson & Johnson, were you employed somewhere
5 else?

6 A. I was.

7 Q. Where?

8 A. The Food and Drug
9 Administration.

10 Q. For how long were you at the
11 Food and Drug Administration?

12 A. Five years.

13 Q. And what job titles did you hold
14 there?

15 A. I was an attorney in the office
16 of chief counsel the entire time --

17 Q. Okay.

18 A. -- I was there.

19 Q. At the Food and Drug
20 Administration, did you have any particular
21 specialty or responsibilities?

22 A. I did. I was a regulatory
23 counsel focused on drug issues. So we had
24 what was called a drugs team and I was on that

1 team.

2 Q. And when you say drug issues,
3 are you referring to prescription drugs?

4 A. Matters relating to the Center
5 for Drug Evaluation and Research. So CDER was
6 essentially my client --

7 Q. Okay.

8 A. -- within FDA.

9 Q. And what is CDER?

10 A. CDER is the center that reviews
11 applications for drugs, mostly prescription
12 drugs, but they also oversee the
13 over-the-counter monograph and work on, you
14 know, ongoing regulatory issues related to
15 drugs and some biologics.

16 Q. Okay. You mentioned when you
17 joined Johnson & Johnson you were director,
18 global regulatory policy and intelligence in
19 the pharmaceutical sector.

20 Did -- did I write that down
21 correctly?

22 A. Yes.

23 Q. Okay. What is the
24 pharmaceutical sector of Johnson & Johnson?

1 A. Well, Johnson & Johnson is
2 comprised of three primary sectors. There's
3 the consumer group, medical devices, and then
4 pharmaceuticals.

5 Q. Okay.

6 A. And I was -- I sat within the
7 pharmaceutical sector.

8 Q. Are you familiar with an entity
9 called Janssen?

10 A. Yes.

11 Q. Okay. And is Janssen a part of
12 Johnson & Johnson?

13 A. It is. It is the pharmaceutical
14 part of Johnson & Johnson.

15 Q. Okay. So Janssen would be
16 included within the pharmaceutical sector --

17 A. Yes.

18 Q. -- is that correct?

19 A. Yes.

20 Q. What were your job
21 responsibilities as director of global
22 regulatory policy and intelligence?

23 A. I primarily focused on our -- on
24 our oncology business and worked on matters

1 relating to USFDA regulatory issues, did a lot
2 of work around combination products,
3 accelerated approvals, expedited pathways,
4 that kind of thing.

5 Q. Did you have any
6 responsibilities relative to Duragesic?

7 A. I did not.

8 Q. Okay. Did you have any
9 responsibilities relative to Nucynta or
10 Nucynta ER?

11 A. I did not.

12 Q. Did you have any
13 responsibilities relative to any opioid
14 product manufactured or sold by Janssen?

15 A. I did not.

16 Q. In that first position, global
17 regulatory policy and intelligence, who did --
18 did you -- did you have a supervisor?

19 A. I did.

20 Q. And who was that?

21 A. David Dorsey.

22 Q. And what was Mr. Dorsey's title?

23 A. He was a senior director, head
24 of the Americas for the global regulatory

1 policy and intelligence group.

2 Q. And did you have any direct
3 reports?

4 A. I did not.

5 Q. All right. The next position
6 you said you held was director of federal
7 affairs?

8 A. Yes.

9 Q. And what were your job
10 responsibilities as director of federal
11 affairs?

12 A. I was, again, on a sort of
13 pharmaceutical sector team, so I was a
14 registered lobbyist working on pharmaceutical
15 issues. I was primarily focused on our
16 immunology and oncology businesses and on
17 matters relating to FDA.

18 Q. Okay. Did you -- as director of
19 federal affairs, did you have -- or did -- did
20 you have any responsibilities related to
21 Duragesic?

22 A. I did not.

23 Q. And did you, as a registered
24 lobbyist, do any lobbying on issues related to

1 Duragesic?

2 A. I did lobbying on issues related
3 to opioids generally.

4 Q. Okay. And did you do any
5 lobbying on issues related to specifically
6 Nucynta or was it just on issues related to
7 opioids generally?

8 A. I only lobbied on issues related
9 to opioids generally.

10 Q. Got it. And what were those
11 issues?

12 A. I lobbied on a bill that was
13 called the MOTHER Act -- Maternal Opioid
14 Treatment, Health, Education, and Recovery, I
15 believe -- and I also, you know, monitored and
16 tracked what ultimately became H.R. 6 and the
17 omnibus opioid bill that was passed and signed
18 into law last fall.

19 Q. Okay. When was the MOTHER Act
20 introduced?

21 A. I believe it was first
22 introduced on the House side in -- I don't
23 recall the exact month, but I think in 2017.

24 Q. Okay. Can you just describe

1 generally the -- what the MOTHER Act provided
2 for?

3 A. Yes. It was focused on
4 providing a continuum of care for mothers and
5 infants who were exposed to opioids or
6 suffering from neonatal abstinence syndrome.

7 So it called for implementation
8 of existing SAMHSA guidelines for the
9 treatment of infants who had been exposed to
10 opioids. It called for better alignment of
11 how expectant women are -- manage pain. It
12 called for SAMHSA to work with public/private
13 partnerships to address education and stigma
14 issues related to the use of opioids and just
15 generally sort of better coordination and
16 better dissemination of existing guidelines
17 around the use of opioids for pregnant and --
18 and women who might become pregnant.

19 Q. Okay. You said you were a
20 registered lobbyist. For whom were you
21 registered?

22 A. For Johnson & Johnson.

23 Q. That's -- and what was
24 Johnson & Johnson's position with respect to

1 the MOTHER Act?

2 A. So we were supportive of it --

3 Q. Um-hmm (affirmative).

4 A. -- and we worked to develop it
5 with key stakeholders.

6 Q. Okay. Were there provisions of
7 the MOTHER Act that Johnson & Johnson opposed?

8 A. No.

9 Q. With respect to H.R. 6, that's a
10 big bill, so I'm not going to ask you to
11 describe it generally. But what was Janssen's
12 position with respect to H.R. 6?

13 A. Well, you said Janssen. I
14 presume you mean --

15 Q. I mean -- I'm sorry. I mean
16 Johnson & Johnson, yes.

17 A. So Johnson & Johnson was
18 supportive of the overall package and the idea
19 of legislative action on opioids.

20 Q. Were there provisions that
21 Johnson & Johnson did not support?

22 A. Well, as you said, it was a very
23 big bill with a lot of components. But, no,
24 we were generally supportive of the entire

1 package.

2 Q. Okay.

3 A. There were provisions we were
4 less, you know, engaged in or -- or less --
5 you know, not tracking as closely.

6 Q. Were there any provisions that
7 you -- I assume as a registered lobbyist in
8 Washington, D.C., you were lobbying Congress;
9 is that correct?

10 A. That's correct.

11 Q. Okay. Were there any provisions
12 that you lobbied Congress and urged lawmakers
13 to vote against or to strike from the bill?

14 A. From H.R. 6?

15 Q. Yes.

16 A. No, there were not.

17 Q. All right. And when I say
18 H.R. 6, I was -- I was using that to refer
19 also to the omnibus opioid bill. Is that --
20 is that the way you were using it as well?

21 A. Yes, that is how I was using it.

22 Q. Okay. Thank you.

23 So, Ms. Cartwright, I believe
24 that -- or hopefully you are aware you are

1 here today as a corporate designee on behalf
2 of Johnson & Johnson and Janssen with respect
3 to certain topics.

4 Is that your understanding?

5 A. That is my understanding.

6 Q. All right. So let's mark the
7 Notice of Deposition first.

8 (Thereupon, J&J-Cartwright
9 Deposition Exhibit Number 1 was marked
10 for identification.)

11 MR. ACKERMAN: I don't want to
12 do it around the camera.

13 Ross, I don't know that there's
14 a good way to get this to you.

15 MR. GALIN: I appreciate it.

16 MR. ACKERMAN: Okay. I've got
17 one more for you, too. I'm going to use this
18 on the Elmo.

19 We're going to go off the record
20 for a quick minute.

21 VIDEO OPERATOR: The time is now
22 9:32 a.m. We're going off the record.

23 (Thereupon, a brief recess was
24 taken.)

1 VIDEO OPERATOR: The time is now
2 9:35 a.m. We're back on the record.

3 BY MR. ACKERMAN:

4 Q. Okay. Ms. Cartwright, the court
5 reporter has handed you Deposition Exhibit
6 Number 1, which is titled Plaintiffs' Amended
7 Notice of Oral Videotaped 30(b)6 Deposition of
8 Carla Cartwright.

9 Have you seen this document
10 before or -- or something similar?

11 A. I have not.

12 Q. Okay. If you look at the second
13 paragraph on the page, it says, This
14 deposition will cover 30(b)6 topics 22(b), 25
15 and 26.

16 Do you see that sentence?

17 A. I do.

18 Q. Is that consistent with your
19 understanding of what you are here to
20 testify --

21 A. It is.

22 Q. -- regarding today?

23 A. It is.

24 Q. All right. Excellent.

1 What did you do to prepare for
2 this deposition today?

3 A. I worked with counsel and
4 reviewed documents and materials and spoke
5 with several colleagues.

6 Q. Okay. Let's work through each
7 of those. Let's start with the last one
8 first, actually.

9 When you say you spoke with
10 colleagues, who were the colleagues who you
11 spoke with?

12 A. I spoke with Lauryl Jackson,
13 Andrea Masciale and Jennifer Thomas.

14 Q. Okay. And who is Lauryl
15 Jackson?

16 A. Lauryl is a director in the
17 federal affairs group on -- focused on Janssen
18 Pharmaceutical issues.

19 Q. Okay. When did you speak with
20 Lauryl Jackson?

21 A. I spoke with her a few times
22 over the last, I'd say, couple of weeks.

23 Q. Okay. About how many times did
24 you speak with her?

1 A. I can think of three
2 conversations.

3 Q. When was the last conversation
4 you had with Lauryl Jackson in preparation for
5 this deposition?

6 A. I think Tuesday of this week.

7 Q. And how long was that
8 conversation?

9 A. I believe it was between 30 and
10 45 minutes, perhaps.

11 Q. Okay. How long were the other
12 two conversations that you had with Lauryl
13 Jackson?

14 A. I don't recall exactly. I think
15 I might have had a, you know, 20-minute
16 conversation with her the week prior. And
17 then I had spoken to her on a couple of
18 other -- you know, we work in the same
19 physical office --

20 Q. Okay.

21 A. -- so I've spoken to her on a
22 couple of other occasions when I'd had, you
23 know, questions as I was thinking of things as
24 I was preparing.

1 Q. Got it.

2 Generally, what topics were you
3 discussing with Lauryl Jackson to -- in order
4 to prepare for the deposition?

5 A. I was talking to her about her
6 recollection of -- of advocacy efforts related
7 to opioids and pain.

8 Q. Okay. Was Lauryl Jackson
9 personally involved in those advocacy efforts?

10 A. She was involved in some efforts
11 related to controlled substances generally.

12 Q. Okay. Which efforts was she
13 involved in?

14 A. There was a -- I think it was a
15 bill passed to have DEA's scheduling of
16 controlled substances better align with the
17 timeline of FDA approval, and Lauryl was
18 involved in that effort.

19 Q. Okay. Were there any other -- I
20 assume you spoke to Lauryl about that effort?

21 A. I did.

22 Q. Did you speak to Lauryl about
23 any other advocacy efforts?

24 A. I did ask her questions about

1 other things. She didn't have a lot of
2 involvement beyond that.

3 Q. Okay. What were the other
4 things that you asked her questions about?

5 A. Just, you know, had she been
6 involved in, you know, advocacy and lobbying
7 related to opioids, related to pain, you know,
8 just generally in her time at J&J.

9 Q. Okay. How long had Lauryl
10 Jackson or has Lauryl Jackson been with J&J?

11 A. I believe maybe 2009, 2010,
12 something like that.

13 Q. Since 2009 --

14 A. Since --

15 Q. -- and 2010?

16 A. Since 2009 or 2010, something
17 like that.

18 Q. And you use J&J. I use J&J. I
19 think we both understand it to mean
20 Johnson & Johnson. I just want to make sure
21 that's clear.

22 A. Yes, that's my -- that's what I
23 mean and that's my understanding when you use
24 it.

1 Q. Okay. And when I use J&J,
2 because I do not work for Johnson and Johnson,
3 I'm using it to describe the umbrella of
4 companies that are subsidiaries or affiliates
5 of Johnson & Johnson, including Janssen
6 Pharmaceuticals.

7 Is that the same way that you're
8 using it?

9 A. It is.

10 Q. Okay. Great.

11 The next person you said you
12 spoke with was Andrea --

13 A. Masciale.

14 Q. Masciale. Thank you.

15 And how many times did you speak
16 with Andrea Masciale?

17 A. Well, again, she's someone I
18 work with regularly.

19 Q. Um-hmm (affirmative).

20 A. So I had spoken to her, you
21 know, multiple times once I learned I would be
22 a company witness. Most recently I spoke with
23 her, I think, yesterday.

24 Q. And I apologize. When I -- I

1 meant to say -- because that was a bad
2 question -- how many times did you speak with
3 her in preparation for this deposition?

4 A. You know, I think, again,
5 because I -- I talk to her so regularly about
6 different things, I probably, you know, asked
7 her questions and talked to her, you know, two
8 or three, four times.

9 Q. Okay. What is Ms. Masciale's
10 title?

11 A. She is the vice president of
12 global regulatory policy and analytics, I
13 believe.

14 Q. All right. How long has
15 Ms. Masciale been with Johnson & Johnson?

16 A. So I believe she's been with the
17 company about 15 years, something around that
18 period.

19 Q. And you may know this and
20 perhaps -- throughout that 15-year tenure, has
21 it always been in the global affairs or
22 advocacy/lobbying arena that you are in?

23 A. So I know that she started in
24 Janssen in global regulatory policy and

1 intelligence and that she was there for
2 several years, and then she moved to
3 government affairs and policy in a policy
4 role.

5 Q. Okay. How long did you speak
6 with Ms. Masciale yesterday?

7 A. I'd say approximately
8 45 minutes.

9 Q. And generally when you spoke
10 with Ms. Masciale, what were you asking
11 Ms. Masciale about?

12 A. I was asking her about her
13 recollection of advocacy efforts related to
14 opioids --

15 Q. Okay.

16 A. -- and our work with trade
17 associations.

18 Q. And was Ms. Masciale involved in
19 advocacy efforts related to opioids?

20 A. Well, she was involved in some
21 policy -- you know, issues just sort of
22 generally related to things around, you know,
23 H.R. 6, the large opioids package that we've
24 talked about, and she was also involved in

1 sort of monitoring the -- the landscape, I
2 would say, around opioids.

3 Q. Okay. And then the last person
4 is Jennifer Thomas. What is Jennifer Thomas'
5 title?

6 A. I believe she is a senior
7 manager. She's within the federal affairs
8 group. She is not a lobbyist. And I'm --
9 she's -- she is essentially our political
10 action committee manager. I'm not sure what
11 her exact title is.

12 Q. And how long has Ms. Thomas been
13 with Johnson & Johnson?

14 A. I'm not sure. I would -- I
15 would think over five years, but I'm not sure.

16 Q. Okay. And when was the last
17 time you spoke with Ms. Thomas in preparation
18 for this deposition?

19 A. Actually, I believe Ms. Thomas
20 has been with J&J since about 2013.

21 Q. Okay.

22 A. That sounds right to me, as I --
23 as I think about your first question. And --
24 I'm sorry -- I lost the second question --

1 Q. That's fine.

2 When was the last time you spoke
3 with Ms. Thomas in preparation for this
4 deposition?

5 A. I -- I spoke with her yesterday.

6 Q. Okay. And for how long?

7 A. I spoke to her a couple of times
8 yesterday. Probably, I don't know,
9 30 minutes, 45 minutes again.

10 Q. And what did you discuss
11 generally with Ms. Thomas in terms of
12 preparing for this deposition?

13 A. I spoke with her about our PhRMA
14 dues and I spoke with her about our campaign
15 donations and donations that we make to
16 various politicians.

17 Q. Okay. If you can estimate for
18 me, what's the total time you spent talking
19 with Ms. Masciale in preparation for the
20 deposition?

21 A. I would guesstimate an hour and
22 a half or so --

23 Q. Okay.

24 A. -- total.

1 Q. And how about the -- the same
2 question for Ms. Jackson.

3 A. Maybe an hour.

4 Q. And what was the total time you
5 spent speaking with Ms. Thomas in preparation
6 for this deposition?

7 A. I would guess another hour --

8 Q. Okay.

9 A. -- or so.

10 Q. You mentioned that you worked
11 with counsel. And I don't want to ask you
12 about communications between you and your
13 counsel, at least not yet. We'll see if I
14 need to get there. I don't think so.

15 But how much time did you spend
16 working with counsel in preparation for this
17 deposition?

18 A. We met over the course of three
19 days for, you know, various time periods.

20 Q. Okay. How much time in total
21 did you spend?

22 A. I would guess 20 hours, maybe a
23 little more.

24 Q. The -- when you say over the

1 course of the three days, were they three
2 consecutive days?

3 A. They were not.

4 Q. Okay. When was the last time
5 you met with counsel?

6 A. I met with him yesterday. I
7 believe that's January 16th.

8 Q. Okay. And -- and I'm -- I'm
9 saying in preparation for this deposition,
10 just to -- just to be clear.

11 And then prior to yesterday --
12 I'm sorry. Yesterday's meeting, was that in
13 person?

14 A. It was in person.

15 Q. Okay. And when was the -- the
16 meeting before yesterday with counsel?

17 A. The day before. So I think
18 that's January 15th.

19 Q. Okay. That's Tuesday of this
20 week?

21 A. Yes.

22 Q. I'm trying to keep track.

23 A. I think that's right.

24 Q. And then you had mentioned three

1 days. So when was the first time that you met
2 with counsel in preparation for this
3 deposition?

4 A. I met with them last week.

5 Q. Okay. When did you find out
6 that you would be testifying at this
7 deposition?

8 A. I believe it was first raised
9 with me in October of last year.

10 Q. Okay. And then you mentioned
11 that you had reviewed documents in preparation
12 for the deposition.

13 A. Yes.

14 Q. Okay. What was the -- how did
15 you determine what documents to review in
16 advance of the deposition?

17 A. Well, I worked with counsel on,
18 you know, understanding the topics that I was
19 to speak to and then reviewing documents
20 related to those topics.

21 Q. So counsel provided you with
22 documents to review; is that correct?

23 A. Yes.

24 Q. Did you on your own seek out any

1 additional documents to review in preparation
2 for the deposition?

3 A. Yes.

4 Q. And what were the documents that
5 you sought on your own?

6 A. I had some E-mail files that I
7 also reviewed.

8 Q. Those E-mail files, were they
9 your own E-mails?

10 A. They were.

11 Q. Okay. And what -- what -- what
12 were you looking for in the E-mail files?

13 A. I was looking -- just looking
14 back to reorient myself to some of the topics
15 that had come up in the course of work,
16 primarily with bio and pharma.

17 Q. Okay. Any topics in particular
18 that caused you to look at your own E-mails?

19 A. No.

20 Q. Okay. Would you turn to page 2
21 of Exhibit 1. And there's a paragraph at the
22 top and it says, Pursuant to Federal Rules of
23 Civil Procedure 30(b)(2) and 34, the deponent
24 should produce all documents which deponent

1 has consulted or reviewed or plans to consult
2 in preparation for -- it says his, but it will
3 be her for this deposition -- for her
4 deposition and has relied upon or will rely
5 upon for testimony in this matter.

6 Do you see that?

7 A. I do.

8 Q. Have you brought any documents
9 with you today for production that you
10 consulted or reviewed in connection with -- in
11 preparation for this deposition?

12 A. I have not.

13 Q. Okay.

14 MR. ACKERMAN: So to the extent
15 there are documents that have not already been
16 produced, Counsel, they should be produced.
17 And I think that would include the E-mail
18 files, because I don't believe Ms. Cartwright
19 is a document custodian in this case.

20 MR. GALIN: I understand. My
21 understanding is that her documents from her
22 E-mails have been produced, but certainly we
23 will work with the witness and with our folks.
24 And if there are any that have not been

1 produced, we will do so.

2 MR. ACKERMAN: Okay. Thank you.

3 BY MR. ACKERMAN:

4 Q. Number 2 says, copies of all

5 curriculum vitae used or prepared by the

6 deponent within the preceding five years.

7 Do you have a copy of your -- of

8 your CV or your resume?

9 A. I do.

10 Q. Excellent. If you would pass

11 that over.

12 MR. GALIN: Do you want those

13 marked as exhibits or just passed over?

14 MR. ACKERMAN: You -- you can

15 just pass them over now.

16 MR. GALIN: Okay.

17 MR. ACKERMAN: I probably should

18 have asked for them first. We could have

19 shortcut some testimony in the beginning.

20 THE WITNESS: Should I give a

21 copy to Misty?

22 MR. GALIN: Why don't you give

23 Misty a copy, yes, since we have an extra.

24 THE WITNESS: Okay.

Highly Confidential - Subject to Further Confidentiality Review

Page 40

1 Mr. Ackerman --

2 MR. GALIN: And you -- you
3 don't -- that's for you.

4 THE WITNESS: Do you need me --

5 MR. GALIN: No. He's got two.

6 Why don't you keep that in case --

7 THE WITNESS: This is me. Oh,
8 okay.

9 MR. GALIN: -- he wants to ask
10 you questions.

11 MR. ACKERMAN: I've -- I've got
12 one.

13 THE WITNESS: Okay.

14 MR. ACKERMAN: We'll take a look
15 at this probably off the record and then --

16 THE WITNESS: Okay.

17 MR. ACKERMAN: -- we can
18 discuss.

19 All right. McKenn Nelson, I had
20 friends there.

21 THE WITNESS: Did you?

22 MR. ACKERMAN: Yes. We'll --
23 we'll discuss that off the record as well.

24

1 BY MR. ACKERMAN:

2 Q. Okay. We can put this
3 deposition notice aside, and let's begin with
4 topic 22(b).

5 Topic 22(b) is The nature and
6 scope of your -- and your, I believe, means
7 Johnson & Johnson here -- membership
8 participation in payments to and/or
9 communications with any -- well, with the
10 Pharmaceutical Research and Manufacturers
11 Association concerning opioids or opioid
12 products.

13 And I've -- I've shortcut that a
14 little bit, because 22 -- topic 22 involves
15 three separate entities, but you are only here
16 on behalf -- to testify with respect to the
17 Pharmaceutical Research and Manufacturers
18 Association; is that correct?

19 A. That is my understanding. And I
20 say PhRMA instead of that full name.

21 Q. That was --

22 A. So when I say PhRMA, that's the
23 name -- that's what I'm referring to.

24 Q. Excellent. That was my --

1 A. Okay.

2 Q. -- next question. So you --
3 you've already anticipated that one.

4 So what is PhRMA?

5 A. PhRMA is a trade association of
6 innovative biopharmaceutical companies.

7 Q. Okay. I assume that J&J is a
8 member of PhRMA?

9 A. It is a member.

10 Q. And for how long has J&J been a
11 member of PhRMA?

12 A. In my preparation we determined
13 that -- for as long as anyone I could ask
14 remembered.

15 Q. Okay.

16 A. So --

17 Q. So that goes back at least --
18 I'd say at least 10 years?

19 A. I think that's fair, yes.

20 Q. Is it at least 20 years?

21 A. I don't know, but I would
22 assume, yes.

23 Q. Okay. Do you know whether J&J
24 was a member of PhRMA in 1996?

1 A. I -- I do not know for a fact,
2 no.

3 Q. And if you wanted to find that
4 out, how would you find it out?

5 A. I would -- probably -- I mean,
6 given that I talked to colleagues and -- and
7 don't know definitively, I guess maybe ask
8 PhRMA.

9 Q. I understand.
10 Does J&J pay dues as part of its
11 membership to PhRMA?

12 A. Yes.

13 Q. Okay. And at present, what are
14 the annual dues that J&J pays to PhRMA?

15 A. I believe they are upwards of
16 \$30 million currently.

17 Q. Okay. Has that number changed
18 over the course of Janssen's or J&J's
19 membership in PhRMA?

20 A. It is my understanding that that
21 amount has increased.

22 Q. All right. Do you have an
23 understanding as to payments in prior years
24 that J&J made to PhRMA for dues?

1 A. I'm not sure I understand the
2 question.

3 Q. Sure. So I think we said it's
4 \$30 million this year, is that correct, on an
5 annual basis?

6 A. Well, it's more than 30 million
7 this year.

8 Q. Okay.

9 A. Yes.

10 Q. More than 30 million. I'm
11 sorry. When I say this year, it's 2019. So
12 are we talking about 30 million -- or more
13 than 30 million for 2019 or is it more than
14 30 million for -- for the year that just
15 passed, 2018?

16 A. Thank you for clarifying. I
17 meant more than 20 -- more than 30 million for
18 2018.

19 Q. Okay. And I've made that
20 mistake many times, so I wanted to -- I'm glad
21 we caught that one.

22 So for 2018, does Janssen have
23 an understanding of what that money -- or how
24 PhRMA spends its dues or what its dues are --

1 are designated for?

2 A. Our understanding is that dues
3 go to a variety of different costs from, you
4 know, PhRMA's staff, which, you know, includes
5 lawyers and scientists and -- you know, they
6 have a -- a policy and science regulatory team
7 to lobbying to, you know, their overhead,
8 travel, all kinds of things.

9 Q. Okay. So are Janssen's payments
10 to PhRMA earmarked for specific purposes?

11 MR. GALIN: Objection to form.

12 THE WITNESS: Could you repeat
13 the question, please.

14 BY MR. ACKERMAN:

15 Q. Yeah, sure. Let's see if I can
16 ask it differently.

17 MR. GALIN: It was just the
18 entity, Counsel.

19 MR. ACKERMAN: Ah. All right.

20 BY MR. ACKERMAN:

21 Q. Are J&J's payments to PhRMA
22 designated for specific purposes?

23 A. Based on my understanding, that
24 is not the case.

1 Q. Okay. In 2017, what were J&J's
2 total payments to PhRMA?

3 A. I believe they were around
4 30 million.

5 Q. Okay. And how about 2016?

6 A. I know that they have increased
7 over time, but do not know the exact amount
8 or -- you know, for 2016.

9 Q. Okay. Do you know the amounts
10 for any other years?

11 A. I do not sitting here.

12 Q. If you wanted to find out, who
13 would you ask?

14 A. I would probably ask Jennifer
15 Thomas, and I guess we'd work with some
16 finance folks to get that.

17 Q. Sure. Does -- Janssen, I
18 assume, keeps records of its payments to --
19 I'm sorry.

20 J&J keeps records of its
21 payments to PhRMA?

22 A. Yes, I believe so.

23 Q. Do you know how much in total
24 J&J has paid to PhRMA throughout the course of

1 its membership?

2 A. I do not know that.

3 Q. All right. Has J&J provided any
4 nonfinancial support to PhRMA?

5 MR. GALIN: Objection to form.

6 THE WITNESS: Can you clarify
7 what you mean by nonfinancial support?

8 BY MR. ACKERMAN:

9 Q. Sure. Has J&J provided PhRMA
10 with personnel or -- or resources or office
11 space or -- or, you know, marketing or -- or
12 anything that's not a direct payment but is --
13 could still be considered assistance?

14 MR. GALIN: Objection to form.

15 THE WITNESS: It's my
16 understanding that we work with PhRMA, so we
17 contribute, you know, in -- through activity
18 to -- you know, efforts that are, you know,
19 joint across the industry, but I'm not aware
20 of, you know, providing office space or, you
21 know, designated personnel or anything like
22 that.

23 BY MR. ACKERMAN:

24 Q. Okay. Are there individuals at

1 J&J who are designated to work with PhRMA or
2 whose job responsibilities include the
3 relationship with PhRMA?

4 A. So there are several people who
5 work with PhRMA. There -- we have a member on
6 the boards. There's a designated person who
7 staffs the board member. And then throughout
8 the company there are people who serve on a
9 variety of different committees and working
10 groups and attend meetings and, you know,
11 participate and engage regularly.

12 Q. So who is the J&J member on the
13 board of PhRMA currently?

14 A. Joaquin Duato.

15 Q. How long has Joaquin Duato been
16 a member on the board of PhRMA for J&J?

17 A. I don't know exactly, but I -- I
18 would think at least the last threeish --
19 three or so years.

20 Q. For how long, approximately, has
21 J&J had a member on the board of PhRMA?

22 A. I do not know.

23 Q. You mentioned that there are
24 individuals who serve on various PhRMA

Highly Confidential - Subject to Further Confidentiality Review

Page 49

1 committees or individuals at J&J that serve on
2 various PhRMA committees; is that right?

3 A. Yes.

4 Q. What are the committees that J&J
5 individuals participate in or sit on?

6 MR. GALIN: Objection to scope
7 and to form.

8 THE WITNESS: So I believe PhRMA
9 forms ad hoc committees and then disbands
10 them, you know, depending on different matters
11 and -- and things that are happening
12 externally. So people serve on those.

13 And then there are some standing
14 committees. I believe there's a legal
15 committee that meets regularly. There's a
16 group called Washington Reps that members of
17 the federal team sit on. There was an abuse
18 prevention working group that I sat on. There
19 are a variety of science and regulatory
20 committees.

21 Those are just a few that come
22 to mind.

23 BY MR. ACKERMAN:

24 Q. Does PhRMA have any

1 committees -- currently, does PhRMA have any
2 committees that are tasked with matters
3 relating to opioids?

4 A. PhRMA does have an abuse
5 prevention working group --

6 Q. Okay.

7 A. -- yes.

8 Q. And who is the J&J member on
9 that committee?

10 A. I have been the member on that
11 committee.

12 Q. And how long have you been on
13 that committee?

14 A. Let's see. Well, the committee
15 isn't currently really meeting regularly. It
16 was -- but I would say two years or so.

17 Q. Okay. Do you know when the
18 committee was formed?

19 A. I don't know exactly when it was
20 formed. I know it was -- I -- I know when I
21 became involved.

22 Q. Okay. And that was
23 approximately two years ago?

24 A. Yes.

Highly Confidential - Subject to Further Confidentiality Review

Page 51

1 Q. Was there a J&J member who was
2 involved in that committee prior to you
3 becoming involved?

4 A. I'm not sure about that.

5 Q. What PhRMA efforts has J&J
6 participated in related to opioids?

7 MR. GALIN: Objection to form.

8 THE WITNESS: So we participated
9 in the committee that I just mentioned, the
10 working group. I believe there was also a --
11 a similar working group focused on state-level
12 issues and that someone participated in that.

13 And, you know, we would, you
14 know, with PhRMA, monitor legislative
15 developments and activity around opioids.

16 BY MR. ACKERMAN:

17 Q. Who from J&J participated in the
18 state-level issues working group that you
19 described?

20 A. I believe it was Bruce Colligen.
21 And for -- it may have also been Tom Warren at
22 some period.

23 Q. And what is Bruce Colligen's
24 title?

1 A. I believe he's an executive
2 director of policy.

3 Q. And Tom Warren's title?

4 A. I think he's a director of state
5 policy.

6 Q. Okay.

7 MR. ACKERMAN: All right. Let's
8 mark this as Deposition Exhibit Number 2.

9 (Thereupon, J&J-Cartwright
10 Deposition Exhibit Number 2 was marked
11 for identification.)

12 BY MR. ACKERMAN:

13 Q. Ms. Cartwright, the court
14 reporter has handed you what has been marked
15 as Deposition Exhibit Number 2.

16 This is a document that was
17 produced in native form by Janssen at Bates
18 number JAN-MS-00393142. We have included the
19 slip sheet as the first page of the document,
20 and then the native file in the manner that it
21 was produced was printed as the rest of the
22 document.

23 Take a moment to look at this
24 document and tell me if you have seen it

1 before.

2 A. I have not seen this document.

3 I -- I don't recall seeing this document

4 before.

5 Q. Okay. If you would turn sort of

6 midway through the document -- and it doesn't

7 have page numbers, so I -- I apologize, but

8 there is a page that begin -- that has the

9 title Examples of Successes.

10 A. Okay.

11 Q. And then underneath has a line

12 that says, PhRMA supports/actively lobbies PMP

13 for first time.

14 Now, let me know when you've

15 located that page.

16 A. I -- I have that page.

17 Q. Okay. Do you know what effort

18 is being described on this page?

19 A. I do not.

20 Q. Okay. Do you know whether PhRMA

21 lobbied Georgia legislative or regulatory

22 entities with respect to their prescription

23 monitoring program?

24 A. You know, I know that PhRMA does

1 engage with states on legislative matters, but
2 I don't know, you know, about a specific
3 effort in Georgia. You know, 50 states, it's
4 a lot to cover --

5 Q. I understand.

6 A. -- a lot for anyone to know,
7 so...

8 Q. The second bullet point says,
9 Law enacted with many of our desired
10 provisions.

11 Do you see that?

12 A. I do see that.

13 Q. Do you know which provisions of
14 the law were desired by J&J or Janssen?

15 A. I don't know that we were
16 engaged in this particular law in Georgia or,
17 you know, involved in this in any way. I
18 mean, again, there's a lot of legislative
19 activity, a lot of states, and so I don't -- I
20 don't know -- I can't say that we were
21 involved at all to support or not support any
22 aspect of it.

23 Q. Okay. Are you familiar with a
24 J&J employee named Robyn Kohn, K-O-H-N?

Highly Confidential - Subject to Further Confidentiality Review

Page 55

1 A. I'm familiar with the name, yes.

2 Q. Okay. And who is Robyn Kohn?

3 A. I believe that she is in the --
4 or was in the pain group. I'm not sure about
5 currently what she's doing.

6 Q. Is she still with
7 Johnson & Johnson?

8 A. I'm not sure.

9 Q. Okay. Robyn Kohn is listed as
10 the custodian of this document, and that's
11 just why I --

12 A. Okay.

13 Q. -- mentioned the name.

14 A couple of bullet points down
15 it says, Defeated 60 unit per Rx limit.

16 Do you know what that refers to?

17 A. I -- I don't. I mean, I assume
18 it's just referring to 60 unit per
19 prescription limit, but I don't know --

20 Q. Okay.

21 A. -- what this is referring to.

22 Q. And do you know whether Janssen
23 provided any input to PhRMA with respect to
24 that provision of a 60 unit per prescription

1 limit?

2 A. I do not know. I know that we,
3 you know, support responsible limits as long
4 as they don't unnecessarily sort of impact
5 appropriate access, but I cannot speak to this
6 particular, you know, Georgia bill and -- and
7 the provisions of it.

8 Q. Okay. Are you aware of any
9 PhRMA efforts in other states concerning --
10 let me -- I'm going to strike that. I'm going
11 to ask that question a -- a -- a little better
12 way.

13 Are you aware of any lobbying
14 efforts undertaken by PhRMA in any other
15 states concerning that state's prescription
16 monitoring program?

17 MR. GALIN: Objection to form.

18 THE WITNESS: I mean, I
19 certainly know that PhRMA is engaged in what's
20 happening in states with various, you know,
21 bills related to controlled substances and
22 opioids and things like that and has been
23 engaged in them, but I don't -- I'm -- I'm not
24 able to speak to PhRMA's activities or state

1 by state and bill by bill.

2 BY MR. ACKERMAN:

3 Q. Do you know whether PhRMA
4 lobbied the Ohio Legislature in connection
5 with the enactment of Ohio's prescription
6 monitoring program?

7 A. I don't know how active PhRMA
8 was involved in that.

9 Q. Do you know whether Janssen --
10 if PhRMA lobbied the Ohio Legislature in
11 connection with the enactment of Ohio's
12 prescription monitoring program, do you know
13 whether Janssen was involved in that effort?

14 A. I just want to make sure I
15 understand. You're talking about Ohio's
16 prescription monitoring program bill?

17 Q. Correct.

18 A. Okay. I do not know, no.

19 Q. Okay. Has Janssen participated
20 in any PhRMA effort in any state in connection
21 with lobbying concerning enactment of that
22 state's prescription monitoring plan bill?

23 A. I believe you asked have we
24 participated?

1 Q. Yes.

2 A. I just want to make sure I'm
3 understanding.

4 Q. Yes.

5 A. You know, we -- we are members
6 of PhRMA and we often participate in their
7 efforts, but I can't speak to, you know, what
8 we've done on any particular state bill. And
9 there -- you know, there was a period, and
10 maybe still now, where there's so many bills
11 happening in any given state. And so, you
12 know, there could be various iterations of a
13 bill. I just -- I -- I can't speak to whether
14 we were engaged in, you know, a particular
15 bill by state.

16 Q. If there was a specific bill
17 that we were asking about, who would you ask
18 to figure out whether Janssen was involved
19 in -- in the PhRMA efforts or participated
20 along with PhRMA in those lobbying efforts?

21 A. I'd have to try to identify the
22 state government affairs person, you know,
23 responsible for that state and then see if,
24 you know, they were involved at that time

1 period and -- and if they knew -- those people
2 do cover, you know, often three to four
3 states, and so our participation, you know,
4 really varies, depending on the issue and --
5 and significance to J&J and things like that.
6 So I'd have to talk to them to see if they
7 were really involved.

8 Q. Okay. The next bullet point
9 says, Defeated wholesaler reporting
10 requirement.

11 A. Um-hmm (affirmative).

12 Q. Do you know what that refers to?

13 A. I do not, no.

14 Q. Okay. And the next bullet point
15 says, Includes balanced pain management
16 language.

17 Do you see that bullet point?

18 A. I do.

19 Q. Do you know what that refers to?

20 A. I do not.

21 Q. Okay. If you flip a few pages
22 further in this document, there is a -- a
23 slide entitled Going Forward. Let me know
24 when you've located that slide. Take a minute

1 to review it.

2 A. I see that slide.

3 Q. Okay. The third bullet point

4 there says, Continue to support/engage with

5 PhRMA on PhRMA initiative and state PMP

6 lobbying.

7 Do you see that bullet point?

8 A. I do.

9 Q. Do you know what involvement, if
10 any, Janssen had with PhRMA in connection with
11 state PMP lobbying?

12 A. I -- I don't, no. I mean,
13 again, you know, we generally are members
14 and -- and support various efforts, but I
15 can't speak to this specific bullet and our
16 involvement.

17 Q. Okay. We can put that one
18 aside.

19 MR. ACKERMAN: I'm going to mark
20 another exhibit. I think this is Exhibit 3;
21 is that right?

22 MR. GALIN: Correct.

23 MR. ACKERMAN: Okay.

24

Highly Confidential - Subject to Further Confidentiality Review

Page 61

1 (Thereupon, J&J-Cartwright
2 Deposition Exhibit Number 3 was marked
3 for identification.)

4 THE WITNESS: Thank you.

5 BY MR. ACKERMAN:

6 Q. Ms. Cartwright, the court
7 reporter has handed you Deposition Exhibit 3,
8 which is a -- an E-mail, Bates-numbered
9 JAN-MS-00943201 through JAN-MS-00943204.

10 Take a moment to review this
11 document and let me know when you've had a
12 chance to review it.

13 A. Okay.

14 Q. Okay. Have you seen this E-mail
15 before?

16 A. I do not believe that I have.

17 Q. Okay. I didn't think so,
18 because you're not on it, but --

19 A. Um-hmm (affirmative).

20 Q. -- since you are the designee,
21 you get the honor of being asked about it.

22 So if you would turn to the
23 second page, please, there is an E-mail at the
24 bottom of the second page from Bruce Colligen.

1 And that's the same Bruce Colligen you already
2 testified to, correct?

3 A. Yes. I believe it is the same
4 Bruce Colligen.

5 Q. Okay. There's not another Bruce
6 Colligen that works at Johnson & Johnson, is
7 there?

8 A. I mean, not that I'm aware of.
9 But there are over 100,000 employees, so...

10 Q. I understand. And then there is
11 a response to that E-mail from a Malcolm
12 Monaghan.

13 A. Um-hmm (affirmative).

14 Q. Do you see that?

15 A. I do see that.

16 Q. And hopefully I'm pronouncing
17 his name correctly, but who is Malcolm
18 Monaghan?

19 A. I do not know Malcolm, who he
20 is.

21 Q. Okay. Mr. Colligen's E-mail
22 begins, The PhRMA state section will meet on
23 Friday for their regular call. One item that
24 the section will vote on is the PDMP program

1 position. See communication below.

2 Do you see that?

3 A. I do.

4 Q. Do you know what the PhRMA state
5 section is?

6 A. I believe that's a, you know,
7 regular standing PhRMA committee focused on
8 state issues.

9 Q. Okay. And does Janssen
10 participate in meetings of that committee?

11 A. I believe that we do.

12 Q. Okay. Who are the individual or
13 individuals who are the primary or have
14 primary responsibilities for involvement with
15 that committee?

16 A. Well, I'm sure it's changed over
17 time, but I would presume that Bruce has been
18 involved for some time period in that kind of
19 a committee for PhRMA.

20 Q. Okay. Did you speak with
21 Mr. Colligen in preparation for this
22 deposition?

23 A. I did not.

24 Q. Okay. So Mr. Monaghan replies

1 to this E-mail and says, We would support this
2 position with one caveat. We want to ensure
3 that a patient that is not getting pain relief
4 and is seeing other physicians in search of
5 relief is not labeled a, quote, Doc Shopper,
6 unquote, simply because they have seen more
7 than one or two doctors in a specified period
8 of time.

9 Do you see that?

10 A. I do.

11 Q. Okay. Do you have an
12 understanding as to what a -- a doc -- what
13 doctor shopping is?

14 A. I have a, you know, sort of
15 general sense, I think, from having heard that
16 used in media.

17 Q. And what -- what is your general
18 sense?

19 A. My general sense is that it's
20 someone who tries to see multiple doctors to
21 get more of a certain kind of medication.

22 Q. Okay. Why was Janssen concerned
23 about -- I'm sorry.

24 Why was J&J concerned about laws

1 that were addressing doctor shopping?

2 MR. GALIN: Objection to form.

3 THE WITNESS: Well, I don't read
4 this as being concerned about laws that are
5 addressing doctor shopping.

6 BY MR. ACKERMAN:

7 Q. Um-hmm (affirmative).

8 A. I read this -- you know, and
9 it's -- it's consistent with my understanding
10 of the J&J position, which is that while we
11 support laws and regulations that address
12 abuse and misuse, we also want to ensure that
13 patients have access to appropriate pain
14 management.

15 And so I'm reading this as
16 saying they want to ensure that, you know, a
17 patient who isn't receiving relief and -- and
18 sees more than one doctor within a time period
19 is not necessarily labeled as such.

20 Q. Okay. Was it -- or is it
21 Janssen's position that a patient who sees
22 three doctors in search of an opioid in a
23 specified period of time is not doctor
24 shopping?

1 MR. GALIN: Objection to scope.

2 THE WITNESS: You know, I'm not
3 a medical professional. I think as a member
4 of our government affairs and policy group, I
5 really, like my colleagues, would defer to our
6 clinical and medical affairs people to make
7 those kinds of calls. And we, you know,
8 collaborate with them for their guidance on
9 those kinds of issues and then, with that
10 understanding, are, therefore, in a position
11 to advocate. So I don't feel equipped to
12 answer that.

13 BY MR. ACKERMAN:

14 Q. Okay. What input did Janssen
15 provide, if any, to the PhRMA state section
16 concerning the -- the issue identified in
17 Mr. Monaghan's E-mail regarding doctor
18 shopping?

19 A. I don't know what specific
20 feedback was provided.

21 Q. Do you know generally what
22 feedback was provided?

23 A. I do not, no.

24 Q. And if you wanted to find out,

1 who would you ask?

2 A. I'd probably have to talk to
3 a -- a few people. You know, I'd start with
4 the people on this E-mail, if they're still
5 members of the company, and kind of go from
6 there.

7 Q. So Bruce Colligen would be one
8 person who you'd probably ask; is that right?

9 A. I would --

10 Q. Okay.

11 A. -- yes.

12 Q. At the bottom of Mr. Monaghan's
13 E-mail, the last two sentences state, Finally,
14 we do support the PDMP process but would
15 prefer it not be housed in the DOJ within a
16 state. We believe having the PDMP be
17 administered by the Board of Pharmacy is more
18 appropriate. I guess those are the -- not
19 necessarily the final two sentences, but two
20 of the final three sentences.

21 Do you see those two sentences?

22 A. I do.

23 Q. Okay. Did Janssen provide any
24 input to PhRMA with respect to this point

1 that's raised in Mr. Monaghan's E-mail?

2 A. I do not specifically know.

3 Q. Okay. Do you know whether other
4 pharmaceutical manufacturers or whether
5 PhRMA -- let me -- strike that. Let me ask a
6 question.

7 Did -- do you know whether PhRMA
8 took the position that the PDMP process should
9 be housed in a board of pharmacy within a
10 state but not in the Department of Justice?

11 MR. GALIN: Objection to scope.

12 THE WITNESS: You know, I know
13 from my involvement with PhRMA that they
14 support PDMPs, but I don't know whether they
15 took a position on where within a state they
16 should be housed.

17 BY MR. ACKERMAN:

18 Q. Okay. Did Janssen participate
19 in any discussions during PhRMA meetings or
20 with PhRMA personnel regarding whether a PDMP
21 process should be housed in the Department of
22 Justice within a state or be administered by
23 the Board of Pharmacy?

24 A. You know, based on -- on my

1 preparation, I'm just not equipped to answer
2 that.

3 Q. Okay. Thank you.

4 So I think we can move on to the
5 next topic, which is actually a -- a set of
6 subtopics.

7 MR. GALIN: I think -- we've
8 been going for about an hour. I think the
9 witness -- if this is a logical time, sort of
10 changing, if we take just a brief five-minute
11 bio break.

12 MR. ACKERMAN: That's fine. Why
13 don't -- why don't we take 10 minutes. That's
14 fair.

15 MR. GALIN: That's probably more
16 realistic.

17 MR. ACKERMAN: Okay. Let's go
18 off the record.

19 VIDEO OPERATOR: The time is now
20 10:23 a.m. We're going off the record.

21 (Thereupon, a brief recess was
22 taken.)

23 VIDEO OPERATOR: The time is now
24 10:43 a.m. We are back on the record.

1 BY MR. ACKERMAN:

2 Q. Okay. We are back on the
3 record, Ms. Cartwright, and I'm going to move
4 on to the next topic, which is topic 25.

5 That reads, The nature and scope
6 of your opioid-related lobbying efforts or
7 governmental affairs activities, including
8 personnel and third parties involved in such
9 efforts or activities and donations or
10 payments made in connection with such efforts
11 or activities. And then it lists -- basically
12 concerning, and then it lists (a) through (i),
13 which I have not counted up, but is probably
14 roughly about 10 different topics.

15 I'll try to walk through each of
16 these topics. Some of them I'll have more
17 questions than others.

18 A. Okay.

19 Q. But the first topic is DSM V.
20 Are you familiar with DSM V?

21 A. I am.

22 Q. And what is DSM V?

23 A. It's a -- like a taxonomy for
24 classifying medical conditions used by

1 physicians, sometimes for treatment
2 recommendations.

3 Q. Okay. Did Janssen participate
4 in any lobbying efforts or governmental
5 affairs activities concerning DSM V?

6 A. No. Based on our preparation,
7 we did not --

8 Q. Okay.

9 A. -- uncover any.

10 Q. And did Janssen make any
11 donations or payments in connection with any
12 activities related to DSM V?

13 A. No, not that we uncovered.

14 Q. All right. Thank you.

15 The next topic is Pain as the
16 5th Vital Sign.

17 Do you have an understanding as
18 to what Pain as the 5th Vital Sign means?

19 A. I believe so.

20 Q. And what is that understanding?

21 A. Well, I think it refers to
22 assessing a patient's pain when they come into
23 a hospital or a physician's office in the same
24 way you look at their, you know, blood

1 pressure or temperature or breathing.

2 Q. Was Pain as the 5th Vital Sign a
3 governmental initiative?

4 MR. GALIN: Objection to scope.

5 THE WITNESS: Can you help me
6 understand what you mean by governmental?

7 BY MR. ACKERMAN:

8 Q. Sure. Was it a concept that was
9 promoted by the federal or state government?

10 A. I -- I really don't know. It's
11 my understanding that it was adopted in some
12 guidelines and kind of went from there.

13 Q. Okay. Did Janssen -- I'm
14 sorry -- did J&J -- I'm going to -- I use
15 Janssen and J&J sort of interchangeably, so
16 I'll -- I will do my best to -- to say J&J for
17 purposes of this deposition.

18 Did J&J engage in any lobbying
19 efforts or governmental affairs activities
20 related to promotion of Pain as the 5th Vital
21 Sign?

22 A. No. We had some involvement in
23 development of a monograph that I think
24 referred to looking at pain, but not anything

1 involving the pain as a fifth vital sign.

2 Q. You say a monograph. What do
3 you mean by a monograph?

4 A. A guideline for -- you know,
5 best practices for how patients should be
6 assessed.

7 Q. Did that monograph have a name
8 or a title?

9 A. I believe there were a couple of
10 versions that were developed by the Joint
11 Commission on hospital accreditation, and
12 JAHCO is the acronym.

13 Q. Yes.

14 A. I'm sort of messing up the name.

15 Q. We'll just call it the Joint
16 Commission.

17 A. Okay.

18 Q. And that's one of the topics.
19 We'll get to that one.

20 A. Okay.

21 Q. Okay. Did Janssen partner with
22 any other organization in connection with
23 promoting Pain as the 5th Vital Sign?

24 MR. GALIN: Objection to form.

1 THE WITNESS: Well, we, you
2 know, partnered with and worked with many
3 organizations and coalitions, but not
4 specifically in support of that.

5 BY MR. ACKERMAN:

6 Q. Okay.

7 (Thereupon, J&J-Cartwright
8 Deposition Exhibit Number 4 was marked
9 for identification.)

10 BY MR. ACKERMAN:

11 Q. Ms. Cartwright, the court
12 reporter has handed you what's been marked as
13 Deposition Exhibit Number 4. It is 4. It is
14 a single-page document with the Bates number
15 JAN-MS-00492411.

16 Take a moment to review this
17 document. Let me know when you've had a
18 chance to review it.

19 A. Okay.

20 Q. Okay. This is an E-mail dated
21 February 14th 2002 from Heather Thomson to
22 Anthony Focella.

23 If you look at the -- well,
24 there's not clean line breaks between each of

1 the paragraphs, but there is a -- a paragraph
2 that begins with now that's about, oh, maybe a
3 third down the page. And the sentence says,
4 Now, the VA nationally is gearing up to launch
5 the next phase of its pain management mandate.
6 As you recall, they started with the Pain as
7 the 5th Vital Sign initiative.

8 Do you see that sentence?

9 A. I do.

10 Q. Okay. Did Janssen have any
11 involvement with the VA, meaning the other
12 Veterans Administration, in connection with
13 the VA's Pain as the 5th Vital Sign
14 initiative?

15 A. So we had involvement with the
16 VA, but I did not in my preparation and
17 conversations uncover anything that indicated
18 that it was specifically around the Pain as
19 the 5th Vital Sign.

20 Q. Okay. If you look a little bit
21 further down the page, there's a sentence that
22 begins, There are several ways.

23 Do you see that?

24 A. Um-hmm (affirmative).

1 Q. And it -- and it reads, There
2 are several ways we can continue to
3 collaborate with the VA as they move into the
4 treatment plans/reassessment phase of the
5 initiative.

6 Do you see that?

7 A. I do.

8 Q. And then a little bit further
9 down it says, I also do not know whether the
10 funding from the old grant is governed by our
11 current letter of agreement which stipulates
12 Janssen's role and how it is spent.

13 Do you see that sentence?

14 A. I do.

15 Q. Do you know whether the -- do
16 you know what old grant is -- they're -- being
17 referred to in this E-mail?

18 A. I do not.

19 Q. Do you know whether that grant
20 had anything to do with promotion of Pain as
21 the 5th Vital Sign at the Veterans
22 Administration?

23 A. I am not familiar with that
24 grant and I'm not reading anything here that

1 would lead me to believe that, but I don't
2 know.

3 Q. Okay. The -- the -- the first
4 sentence or the -- I guess it was the second
5 sentence that I read said, There are several
6 ways we can continue to collaborate with the
7 VA.

8 A. Yes, I see that.

9 Q. The collaboration that occurred
10 prior to this E-mail, did any of that
11 collaboration involve promotion of Pain as the
12 5th Vital Sign?

13 A. It is my understanding that we
14 have never promoted Pain as the 5th Vital
15 Sign, generally speaking. So I can't speak
16 to, you know, what was done in the prior
17 collaboration with the VA, but it's my
18 understanding that it did not involve Pain as
19 the 5th Vital Sign.

20 Q. Okay. You can put that document
21 aside.

22 The next topic is just a
23 shorthand, lobbying efforts related to REMS
24 for opioid or opioid products.

1 What is a -- a REMS?

2 A. A REMS is a risk evaluation
3 mitigation strategy that FDA requires for
4 certain drug and medical products.

5 Q. Okay. And were there REMS in
6 place for J&J's opioid products?

7 A. Yes.

8 Q. Okay.

9 A. Wait. I'm sorry. When you say
10 J&J's opioid products, can we clarify what
11 products you mean --

12 Q. Sure.

13 A. -- just to make sure I --

14 Q. Were -- were -- was there a REMS
15 in place for -- for Nucynta and Nucynta ER?

16 A. Yes.

17 Q. Okay. Was there a REMS in place
18 for Duragesic?

19 A. Okay.

20 MR. GALIN: I think you --

21 BY MR. ACKERMAN:

22 Q. You have to speak.

23 A. Oh, I'm sorry. Yes. Sorry.

24 Q. All right. Very good.

1 So generally, what lobbying
2 efforts or governmental activities did Janssen
3 participate in with respect -- if any, with
4 respect to REMS for those products?

5 A. So J&J was involved in the
6 development and drafting of the opioid REMS
7 based on a request from FDA. FDA asked all of
8 the sponsors to work together to develop
9 class-wide REMS and J&J acceded and -- and
10 participated and was involved in, you know,
11 committees and working groups in the -- in the
12 development of the REMS.

13 Q. Were there particular
14 individuals at J&J who were responsible for
15 that effort?

16 A. Yes. I believe J&J's
17 participation was led by Susan Nicholson. And
18 I think two of the other primary people were
19 our therapeutic area heads for safety and
20 medical affairs, Bruce Moskovitz and Gary
21 Vorsanger.

22 Q. Okay.

23 A. Yes.

24 Q. What is Susan Nicholson's title?

1 A. She's a medical doctor. I think
2 her current title -- she's currently in the
3 office of the chief medical officer currently
4 responsible for women's health, but she's held
5 a variety of roles within J&J.

6 Q. What was the time period that
7 J&J was involved with the development and
8 drafting of the opioid REMS?

9 A. I believe the request from FDA
10 and the public meetings were around the 2009
11 time period and J&J was involved in an
12 industry working group during that time
13 period. And then the REMS also required some
14 postmarketing requirement studies, and J&J was
15 involved in some of the studies as well.

16 Q. Okay. And the postmarketing
17 studies, was that also in the 2009 time
18 period?

19 A. Well, they would have continued
20 from there. So once the REMS was approved and
21 in place, then the -- I'm not sure how long
22 the trials went on. Could have been several
23 years.

24 Q. Okay. Is there a record of any

Highly Confidential - Subject to Further Confidentiality Review

Page 81

1 donations or payments made by J&J in
2 connection with those efforts?

3 A. I'm sorry. Payments to whom or?

4 Q. To anyone.

5 MR. GALIN: Objection to form.

6 THE WITNESS: We're not aware
7 of -- of any payments related to the opioid
8 REMS, no.

9 MR. ACKERMAN: Okay. Let's go
10 to number --

11 (Thereupon, J&J-Cartwright
12 Deposition Exhibit Number 5 was marked
13 for identification.)

14 BY MR. ACKERMAN:

15 Q. Ms. Cartwright, the court
16 reporter has handed you Deposition Exhibit
17 Number 5, which is a document that was
18 produced by Janssen/J&J, in this action in
19 native form at the Bates number
20 JAN-MS-00409840. As with the other document,
21 we've included the slip sheet as the first
22 page and then the native document behind that.

23 Take a moment to review this
24 document. Let me know if you have seen it

1 before.

2 A. I have not seen this document.

3 Q. Okay. The cover page of the
4 presentation of the file says Nucynta 2011
5 Business Plan Advocacy Initiatives.

6 Do you see that?

7 A. I see that, and I see that it
8 also says it's a draft.

9 Q. Okay. And I take it this is not
10 a document that you reviewed in preparation
11 for this deposition, right?

12 A. I looked at a lot of documents.
13 I don't believe I reviewed this one, though.

14 Q. Okay. If you would turn to
15 page 3, please. That's the -- it's got the
16 title Budget Activity at the top.

17 A. Okay.

18 Q. And about halfway down the page,
19 there is a line item for Opioid REMS Advocacy
20 Support. And if you follow it across, it says
21 \$1 million.

22 Do you see that?

23 A. I do.

24 Q. Okay. And at the bottom where

1 it says Totals, it says -- the -- the second
2 total there says 1 million REMS.

3 So do you know what those -- do
4 you know whether that \$1 million was actually
5 paid that's reflected in this proposed budget?

6 A. I do not, no.

7 Q. Okay. Do you know if that
8 \$1 million had been paid, what the line
9 items -- strike that. Let me ask a -- a
10 better question.

11 The line item says, Opioid REMS
12 Advocacy Support.

13 A. Um-hmm (affirmative).

14 Q. What does that refer to?

15 A. So I don't know -- you know,
16 specifically I have not seen this document. I
17 don't have any reason to, you know, know --
18 know whether, you know, this -- this -- this
19 draft, you know, maintained this, whether this
20 payment was made or anything like that.

21 But, you know, advocacy support
22 could mean any number of things. You know,
23 generally education, REMS were a new concept.
24 It was a really big undertaking for the

1 healthcare community. Prescribers had to be
2 educated, trained and, in some cases,
3 certified. And there was a lot of concern
4 about, you know, people being afraid of
5 dealing with REMS and things like that.

6 So I could imagine, based on,
7 you know, my understanding of other
8 educational efforts we've done for, you know,
9 new initiatives that it -- it could have
10 involved some of that kind of educational and
11 advocacy support, but I don't specifically
12 know, you know, this line item.

13 Q. Okay. If you -- let's put that
14 one -- that document aside.

15 A. Okay.

16 (Thereupon, J&J-Cartwright
17 Deposition Exhibit Number 6 was marked
18 for identification.)

19 BY MR. ACKERMAN:

20 Q. Ms. Cartwright, the court
21 reporter is handing you Deposition Exhibit
22 Number 6, which is a document produced to us
23 in native form at JAN-MS-008774627.

24 Take a moment to review this

1 document. Let me know when you've had a
2 chance to review it.

3 You've had a chance to review
4 it?

5 A. I believe so.

6 Q. Okay. Do you recognize this
7 document?

8 A. I do not.

9 Q. Okay. Does the format of the
10 document look familiar to you?

11 A. It does not.

12 Q. About two-thirds or maybe
13 three-quarters of the way down the page,
14 there's a line item -- well, if you look in
15 the lower left-hand corner it says, 2010
16 Advocacy Budget, 1.5.

17 A. I see that.

18 Q. You see that?

19 Does that -- does the term
20 advocacy budget have any meaning to you?

21 A. Not particularly, no.

22 Q. Okay. About three-quarters of
23 the way down the page, there is a line for
24 Opioid REMS Advocacy Support.

1 A. I see that.

2 Q. And then next to it, it says,
3 Tufts Summit.

4 A. Um-hmm (affirmative).

5 Q. Do you know what the Tufts
6 Summit is?

7 MR. GALIN: Objection to scope.

8 THE WITNESS: I do not.

9 BY MR. ACKERMAN:

10 Q. Okay. All right. Do you know
11 whether the Tufts Summit had anything to do
12 with the opioid REMS?

13 A. I mean, I know --

14 MR. GALIN: Objection to scope.

15 THE WITNESS: -- I -- I know
16 that the development of the opioid REMS was a
17 major undertaking, you know, rather onerous,
18 involving a lot of different sponsors and a
19 lot of very complicated issues and that, you
20 know, it took significant time and commitment
21 from, you know, multiple parties to kind of
22 bring it about. But I don't specifically
23 know -- and I know there were multiple
24 meetings -- I'm -- is what -- I guess is what

1 I'm trying to say, but I don't specifically
2 know what the Tufts Summit was.

3 BY MR. ACKERMAN:

4 Q. Okay. Underneath Tufts Summit
5 it says -- this document says, Local
6 Markets/Payor-facing Orgs/SG/HPAD.

7 Do you see that line item?

8 A. I do, yes.

9 Q. Do you know whether that line
10 item relates to opioid REMS spending?

11 MR. GALIN: Objection to scope
12 and form.

13 THE WITNESS: You know, I don't.
14 I -- I know that HPAD -- you know, assuming
15 that this is a J&J or Janssen document --
16 refers to health policy advocacy directors.
17 You know, they're a group that does a lot of
18 education and advocacy outreach, but I don't
19 know whether this was related to the opioid
20 REMS or something else or -- you know, I can't
21 speak to specifically what this is.

22 BY MR. ACKERMAN:

23 Q. Okay. Put that one aside.

24 The next document that the court

1 reporter is --

2 MR. ACKERMAN: I apologize. Go
3 ahead and mark the document.

4 (Thereupon, J&J-Cartwright
5 Deposition Exhibit Number 7 was marked
6 for identification.)

7 BY MR. ACKERMAN:

8 Q. The next document that the court
9 reporter has handed you is marked Deposition
10 Exhibit Number 7. And that is a -- another
11 file produced to us in native form at Bates
12 number JAN-MS-00339015.

13 Take a moment to review the
14 document. I -- it's a lengthy document. I
15 can tell you the only page that I have
16 questions on is page 19.

17 A. Okay.

18 Q. If you need to review the whole
19 document you can, but if you can only focus on
20 19, that might save us some time.

21 A. Not all of them are numbered.

22 MR. GALIN: No, but 19 does have
23 a number. It looks like this (indicating).

24 THE WITNESS: Okay. Thank you.

1 MR. ACKERMAN: I don't know why
2 that is.

3 THE WITNESS: Oh, there is it
4 is. Okay. Okay.

5 BY MR. ACKERMAN:

6 Q. Okay. You've -- you've had a
7 chance to review it?

8 A. Well, at least page 19.

9 Q. At least page 19?

10 A. Yes.

11 Q. And that's the only -- the
12 question I have is if you look at page 19,
13 there is a bullet point that says, Key
14 Investments. And a table underneath that
15 bullet point in the third row says, REMS,
16 Advocacy, FED, Regional, State, and then cost
17 250K, which I assume means \$250,000.

18 Do you know what payments are
19 referred to in this -- in this table?

20 A. You know, as I've said, I -- I
21 have an understanding as to generally how we
22 support education and advocacy efforts for new
23 initiatives. So I would assume it's in
24 keeping with that kind of thing, you know, if

1 these payments were actually even made, but I
2 don't know the specific payments.

3 Q. Okay. All right. You can put
4 that document aside.

5 Topic 25(d) is lobbying efforts,
6 governmental affairs, donations or payments
7 made in connection with the rescheduling of
8 opioids or your opioid products from a
9 Schedule III narcotic to a Schedule II
10 narcotic.

11 What, if any, lobbying efforts
12 or governmental affairs activities did J&J
13 undertake in connection with the rescheduling
14 of opioids or its opioids from a Schedule III
15 to a Schedule II narcotic?

16 MR. GALIN: Objection to form.

17 THE WITNESS: Based on our
18 efforts to prepare, we are not aware of any.

19 BY MR. ACKERMAN:

20 Q. Okay. We can move on to topic
21 (e), then, which is the nature and scope of
22 opioid-related lobbying efforts or
23 governmental affairs activities related to the
24 Joint Commission on Accreditation of

1 Healthcare Organizations. And I -- this is
2 the -- I assume the organization you were
3 trying to refer to earlier?

4 A. It is.

5 Q. And informally I'm going to
6 refer to this organization as JCAHO.

7 A. I will do the same.

8 Q. That's -- that's perfect. Yeah.
9 I just wanted to make sure you understood what
10 I was referring to.

11 A. Um-hmm (affirmative).

12 Q. What is JCAHO?

13 A. So it's an accreditation
14 organization for, you know, all kinds of
15 hospitals, and they provide guidelines and
16 best practices in addition.

17 Q. Has J&J participated in any
18 lobbying efforts or governmental affairs
19 activities related to JCAHO's pain standards
20 for hospital accreditation?

21 A. So it's my understanding that we
22 received a request from them to help support
23 development of the monograph and that we did
24 so.

1 Q. And when was this request
2 received?

3 A. I believe -- you know, at this
4 moment it's not coming to me. I'll let you
5 know if I can pull it up --

6 Q. Okay.

7 A. -- that date.

8 Q. Are there -- who were the
9 individuals involved with this effort?

10 A. They were individuals from our
11 medical affairs group.

12 Q. Do you know the names of any
13 Janssen employees specifically?

14 A. I believe Bruce Moskovitz and
15 Gary Vorsanger may have been involved in this
16 as well.

17 Q. Okay. You said it was a -- a
18 request to support the development of a
19 monograph.

20 Did that monograph have a title
21 or a name?

22 A. I don't know the specific title.
23 I believe there was an initial monograph and
24 then a few years later a -- a follow-on.

Highly Confidential - Subject to Further Confidentiality Review

Page 93

1 Q. Okay. And what specifically did
2 that monograph address?

3 A. I -- I think it was related to
4 pain management specifically.

5 Q. I understand you didn't -- you
6 don't remember the date.

7 Is this a recent effort or was
8 this earlier?

9 A. I -- I'm thinking early 2000s --

10 Q. Okay.

11 A. -- but don't recall the exact
12 year.

13 Q. It predated your joining J&J,
14 though; is that correct?

15 A. Yes.

16 Q. Okay.

17 A. That's my understanding.

18 Q. We're going to --

19 MR. ACKERMAN: Do we have a
20 stapler in here?

21 MR. GALIN: There's probably one
22 in the back left corner of that.

23 MR. ACKERMAN: So there are a
24 set of documents that were produced by Janssen

Highly Confidential - Subject to Further Confidentiality Review

Page 94

1 as a family, and I want to make sure I keep
2 them together, hopefully in the right order,
3 so --

4 MR. GALIN: It seems like
5 there's a political joke to be made here.

6 MR. ACKERMAN: We will mark that
7 as the next exhibit.

8 (Thereupon, J&J-Cartwright
9 Deposition Exhibit Number 8 was marked
10 for identification.)

11 THE WITNESS: Thank you.

12 BY MR. ACKERMAN:

13 Q. Ms. Cartwright, the court
14 reporter has handed you what is marked as
15 Exhibit Number 8. It is a multi-page document
16 with Bates numbers JAN-MS-00654707 through
17 -711. I'll note that two of the documents
18 that were attachments to this E-mail were
19 produced to us in native form, and so we've
20 included the slip sheet and the native files
21 in this document.

22 Take a moment to review the
23 document. Let me know when you've had a
24 chance to review it.

1 MR. ACKERMAN: Counsel, I would
2 note that the page at 654708 is noted to be
3 withheld as not responsive. I don't know
4 whether that's because it was -- I -- I don't
5 know why that is, but I'd ask you to look into
6 that.

7 MR. GALIN: I don't know why
8 that is either, but I will look into it as
9 well.

10 MR. ACKERMAN: Okay. Thank you.

11 MR. GALIN: I'm just not -- I
12 just want to make sure I'm -- oh, okay.

13 BY MR. ACKERMAN:

14 Q. Have you reviewed it?

15 A. At high level, yes.

16 Q. Okay. Sure.

17 Have you seen this document
18 before?

19 A. I believe I've seen parts of
20 this document.

21 Q. Okay. Which parts of the
22 document have you seen?

23 A. I believe I've seen the last
24 page, 654711.

1 Q. Okay. Is this -- if you turn
2 back to the first page, the subject matter of
3 this E-mail says, JCAHO pain management, Jean
4 Gillespie.

5 Is this E-mail referring to the
6 pain management project that you testified to
7 earlier?

8 A. I believe so, yes.

9 Q. Okay. And the E-mail says or
10 appears to ask Gary Vorsanger to take the lead
11 on the project.

12 Did -- did Gary Vorsanger, in
13 fact, take the lead on this -- this project?

14 A. I believe that's the case.

15 Q. Okay. Did Janssen provide any
16 financial support to JCAHO in connection with
17 the drafting or promotion of its pain
18 management standards?

19 A. It's my understanding that we
20 did provide funding.

21 Q. Okay. When?

22 A. So in preparing, I think it was
23 a little difficult for us to determine exactly
24 when and -- and over what time period, but I

1 believe in the early 2000s.

2 Q. Okay. And approximate -- or do
3 you know how much funding was provided?

4 A. I believe it was 50,000, but I'm
5 not sure if that was just -- just that or --
6 or maybe there was another time period
7 involved, too.

8 Q. Okay. Was the 50,000 in a
9 single payment or in multiple payments?

10 A. That I do not know.

11 Q. Okay. Do you know -- okay.

12 Other than Mr. Moskovitz and
13 Mr. Vorsanger, was anyone else at J&J involved
14 in this JCAHO pain management effort?

15 A. I believe some others who, you
16 know, might have reported to them or been --
17 you know, others in -- in medical affairs may
18 have had some involvement in, you know,
19 providing scientific input.

20 Q. Okay. Specifically, do you know
21 who?

22 A. I do not.

23 Q. All right. Why did J&J become
24 involved in increasing awareness of the JCAHO

1 guidelines in pain -- pain management?

2 A. Well, I believe that we feel
3 like it's important to ensure that people who
4 are suffering from pain have adequate access
5 to appropriate treatments and that education
6 is -- is a -- you know, a good thing in --
7 in -- in the different product areas and
8 disease areas where we work.

9 And so it would not be, you
10 know, atypical for us to provide funding or,
11 you know, want to have a seat at the table
12 when something like this was sort of being
13 discussed and -- and proposed.

14 Q. When you say adequate access to
15 appropriate treatments, does that include the
16 prescribing of Janssen -- or J&J's opioid
17 products?

18 A. Well, it could, depending on the
19 decision of the appropriate, you know, medical
20 professional.

21 Q. Okay. Did the JCAHO guidelines
22 in pain management -- strike that. Okay.

23 Let's move on to the next topic,
24 which is 25(f). And this is lobbying efforts

1 or governmental affairs activities related to
2 the Medicare Modernization Act of 2003.

3 Do you have an understanding as
4 to what the Medicare Modernization Act of 2003
5 is or was?

6 A. I think I have a general
7 understanding.

8 Q. And what is that understanding?

9 A. That it was sort of the genesis
10 of Part D in the prescription drug benefit.

11 Q. And did J&J engage in any
12 lobbying efforts or governmental affairs
13 activities in connection with the Medicare
14 Modernization Act of 2003?

15 A. We did.

16 Q. And what were those activities?

17 A. Well, it was really a major
18 undertaking for our industry, and we were, you
19 know, focused on it at a variety of, I think,
20 sort of different, you know, levels, looking
21 at issues around negotiation, you know,
22 therapeutic area classification, how
23 formularies were put together.

24 So we were, you know, looking at

1 the different policy issues that were raised
2 and, you know, actively engaged in -- in
3 support of it and -- and in ensuring that it
4 was designed, you know, in a way that would
5 work for the system.

6 Q. Okay. Who were the individuals
7 at J&J who were involved in that effort?

8 A. I think it would have been a --
9 you know, a real cross section of our
10 government affairs and policy group. So those
11 who were on the federal affairs team at the
12 time, as well as those involved in, you know,
13 policy.

14 Q. Did J&J engage any outside
15 lobbyists in connection with that effort?

16 A. Well, J&J maintains
17 relationships with several consultants who
18 lobby on our behalf on a number of issues.
19 They're, you know, on a retainer sort of
20 status, so they're -- I would presume, just
21 based on the way we normally operate, that
22 it's very likely that they could have also
23 been engaged in assisting in those efforts.

24 Q. And who were the outside

Highly Confidential - Subject to Further Confidentiality Review

Page 101

1 consultants during this time period, 2003, who
2 would have -- or who did assist in the
3 lobbying efforts in connection with the
4 Medicare Modernization Act?

5 A. You know, I think that's
6 something we would have to try to pull
7 together for you. You know, several of the
8 people who were around in 2003 are no longer
9 with the company. So we did what we could to
10 talk to people, you know, were there -- who
11 were still in the company. And I -- I think
12 we'd have to try to see if the -- you know, if
13 there's anyone who was still in the company
14 who would, you know, have known who the
15 lobbyists were at that time.

16 Q. Were any of -- were any of J&J's
17 lobbying efforts or -- or governmental affairs
18 activities in -- undertaken with respect to
19 this Medicare Modernization Act specific to
20 opioids?

21 A. I do not believe that was the
22 case. I think we were generally focused on
23 the high level, you know, issues and design of
24 the -- of the program.

1 Q. Okay. Were any of the efforts
2 specific to the treatment of pain generally?

3 A. I do not believe so.

4 Q. Okay. Let's move on to topic
5 25(g), which is the lobbying efforts or
6 governmental affairs activities concerning
7 direct to consumer advertising regulations.
8 The first question is the broad one:

9 Has J&J engaged in any lobbying
10 efforts or governmental affairs activities
11 related to direct to consumer advertising
12 regulations?

13 A. No, we have not, is my
14 understanding, engaged in lobbying around
15 that.

16 Q. Any governmental affairs
17 activities?

18 A. Well, we have to, you know,
19 liaise with the FDA about our own products and
20 our own advertising and things like that, but
21 I'm not aware of anything sort of broader
22 than -- than product-specific efforts and
23 activities.

24 Q. In your preparation for the

1 deposition today, did you inquire into any
2 product-specific activities or efforts related
3 to direct to consumer regulations?

4 A. I did look at some
5 product-specific activity.

6 Q. Okay. Were there any
7 product-specific activities that J&J undertook
8 in connection with Duragesic or Nucynta?

9 A. In my preparation, I did look at
10 some activity that we took around Duragesic
11 advertising.

12 Q. Okay. And what was that
13 activity?

14 A. We reached out to FDA when we
15 determined that we thought it would make sense
16 to do some direct to consumer advertising and
17 asked, you know, for input on the appropriate
18 way to do that. And I believe the
19 determination was to do print advertising
20 only, that that would be the best way to reach
21 the, you know, appropriate audience.

22 Q. Do you recall the approximate
23 time period when this occurred?

24 A. I mean, I don't. I'm sorry.

1 Q. Okay. The direct to consumer
2 advertising that J&J reached out to the FDA
3 concerning, did that advertising have a -- a
4 name or a -- a subject matter? Strike the
5 subject matter.

6 Did that advertising have a
7 name?

8 A. Did the advertising have a name?
9 Not that I can recall.

10 Q. Okay. Was there any colloquial
11 name that it was referred to within J&J?

12 MR. GALIN: Objection to form
13 and scope.

14 THE WITNESS: Not that I'm aware
15 of.

16 BY MR. ACKERMAN:

17 Q. Okay. Are you aware of what the
18 ads were that J&J discussed with the FDA
19 concerning Duragesic?

20 MR. GALIN: Objection to form
21 and scope.

22 THE WITNESS: You know, I'm --
23 I'm not in marketing or advertising, so I'm
24 really just more familiar with what we did in

1 terms of outreach to FDA. So I don't know any
2 specifics about, you know, the actual content
3 or -- or nature of the ads.

4 BY MR. ACKERMAN:

5 Q. So the outreach to the FDA was
6 to ask about the ad; is that correct?

7 A. That's my understanding.

8 Q. Okay. And so what questions
9 were asked?

10 A. Again, you know, not having real
11 background or expertise in that area, I
12 believe that they were, you know, informing
13 FDA that they were thinking about doing some
14 direct to consumer advertising and asking for
15 input on the proposed approach --

16 Q. Okay.

17 A. -- which was to do print ads.

18 Q. Was it a -- so what I'm trying
19 to get at here was, was it a proposed approach
20 or a specific proposed advertisement?

21 A. And that I do not know.

22 Q. Okay. Ms. Cartwright, the --

23 MR. ACKERMAN: Well, mark it
24 first.

Highly Confidential - Subject to Further Confidentiality Review

Page 106

1 (Thereupon, J&J-Cartwright
2 Deposition Exhibit Number 9 was marked
3 for identification.)

4 BY MR. ACKERMAN:

5 Q. Ms. Cartwright, the court
6 reporter has handed you Deposition Exhibit
7 Number 9, which is a multi-page document with
8 the Bates numbers JAN-MS-00479781 through
9 -783.

10 Take a moment to review this
11 document. Let me know if you've seen it
12 before.

13 A. Okay.

14 Q. Have you seen this document
15 before?

16 A. I do not believe I have.

17 Q. Okay. This -- it's entitled
18 Record of FDA Contact.

19 Do you know whether this
20 document concerns the direct to consumer
21 efforts that you had described earlier?

22 A. I believe it does.

23 Q. Okay. Do you see under Key
24 Points the first point says, FDA expressed

1 concerns that DTC advertising could result in
2 increased serious adverse events due to
3 inappropriate use or use by inexperienced
4 physicians?

5 A. I do.

6 Q. Is it your understanding that
7 that is a -- a point that the FDA communicated
8 to Janssen?

9 MR. GALIN: Objection to form.

10 THE WITNESS: I believe so.

11 BY MR. ACKERMAN:

12 Q. Okay. Now, at the top of the
13 first page of this document it says, Janssen
14 Pharmaceutica Research Foundation.

15 Do you see that?

16 A. I do.

17 Q. And is Janssen Pharmaceutica
18 Research Foundation a subsidiary of J&J?

19 A. I'm actually not familiar with
20 that -- that name, Pharmaceutica Research
21 Foundation.

22 Q. Is Janssen generally a J&J
23 company?

24 A. Yes.

1 Q. Thanks.

2 And I think I already asked
3 this, but do you know -- well, if you turn to
4 the last page of the document, the -- the very
5 last paragraph says, Regarding next steps, we
6 agreed we would revise the draft ad and
7 patient brief summary and resubmit.

8 Do you see that sentence?

9 A. I do.

10 Q. Do you know whether Janssen did,
11 in fact, revise the draft ad and patient brief
12 summary and resubmit to the FDA?

13 A. Based upon what I know about the
14 company, I'm -- I'm sure we did.

15 Q. Okay.

16 A. I would be shocked if we did
17 not.

18 MR. ACKERMAN: So let's go with
19 22 as the next document.

20 BY MR. ACKERMAN:

21 Q. And, again, you don't know
22 sitting here today what the draft ad was; is
23 that right?

24 A. That is correct.

Highly Confidential - Subject to Further Confidentiality Review

Page 109

1 (Thereupon, J&J-Cartwright
2 Deposition Exhibit Number 10 was marked
3 for identification.)

4 BY MR. ACKERMAN:

5 Q. Ms. Cartwright, the court
6 reporter has handed you a document that has
7 been marked as Deposition Exhibit 10. It's a
8 single-page document with the Bates number
9 JAN-MS-00480543.

10 Take a moment to review the
11 document. Let me know when you've had a
12 chance to review it.

13 A. Okay. I've reviewed it.

14 Q. Okay. If you look at
15 Exhibit 9 -- I'll try to put them side by
16 side -- Exhibit 9 has a date of September 15th
17 2000; is that right?

18 A. Yes.

19 Q. And then Exhibit 10 has a date
20 of December 18th 2000.

21 Do you see that?

22 A. Yes.

23 Q. And then Exhibit 10 says, I
24 called Mark to let him know of our change in

1 plans regarding Duragesic advertising. I told
2 him that, following much internal discussion,
3 we had decided not to proceed with the Direct
4 to Consumer advertising campaign at this time.

5 Do you see that note?

6 A. I do.

7 Q. And is this Exhibit 10 a record
8 of what J&J communicated to the Food and Drug
9 Administration?

10 MR. GALIN: Objection to form.

11 THE WITNESS: That's my
12 understanding, based on what I see.

13 BY MR. ACKERMAN:

14 Q. Okay. You mentioned you had
15 believed that J&J had gone forward with the
16 print ad.

17 A. No, what I meant was that I
18 would have -- I believed we would have revised
19 it before proceeding.

20 Q. Okay.

21 A. So it looks like we made a
22 decision not to continue the plan. But I
23 meant I was -- based on what I read at the end
24 of Exhibit 9 and my understanding of just the

1 company and the way we operate that we would
2 not have proceeded without addressing FDA's
3 concerns.

4 Q. I -- I understand.

5 A. Okay.

6 Q. Thank you for clarifying.

7 Do you know whether Janssen ever
8 published the direct to consumer campaign for
9 Duragesic?

10 MR. GALIN: Objection to scope
11 and form.

12 THE WITNESS: I do not know
13 whether we ever published any DTC ad for
14 Duragesic. You know, it could have been a
15 different time period, different ad, you know,
16 beyond this one. I'm not sure.

17 BY MR. ACKERMAN:

18 Q. Okay. All right. Are you aware
19 of any other governmental activity or lobbying
20 effort that J&J engaged in concerning direct
21 to consumer advertising regulations?

22 A. No, I am not.

23 Q. Let's move on to topic 25(h),
24 which is lobbying efforts or governmental

1 affairs activities related to regulations
2 allowing the prescription of 90-day supplies
3 of opioids or Schedule II narcotics.

4 And that, again, is another
5 topic that you are designated to testify on;
6 is that correct?

7 A. It is.

8 Q. All right. What lobbying
9 efforts or governmental affairs activities, if
10 any, did J&J engage in concerning regulations
11 allowing the prescription of 90-day supplies
12 of opioids or Schedule II narcotics?

13 A. I am not aware of any.

14 Q. I think, if you looked at
15 Exhibit 3 earlier -- and we had discussed
16 this -- there was a reference to a -- a 60 --
17 a -- a 60-day prescription limit. If you want
18 to pull it out, we can look at it.

19 Oh, it's Exhibit 2. My
20 apologies. It was at the page that started
21 Examples of Successes.

22 A. Okay.

23 Q. And you can see there that
24 there's the reference to Defeated 60 unit per

1 Rx limit.

2 A. But I'm reading this as a PhRMA
3 document --

4 Q. Okay.

5 A. -- or a PhRMA, you know, slide,
6 as I'm understanding this, and it's referring
7 to, you know, I presume what PhRMA has done.
8 But I do see that, Defeated 60-day.

9 Q. And -- and -- and my question
10 is, are you aware of any efforts by J&J or
11 Janssen concerning a 60 unit per prescription
12 limit in -- provision in the Georgia PMP
13 legislation?

14 A. You know, I'm aware of us
15 supporting appropriate restrictions and, you
16 know, things to prevent diversion and misuse
17 and abuse, but I'm not aware of this specific
18 Georgia bill.

19 Q. Okay. And that brings us to
20 topic 25(i), which is lobbying efforts or
21 governmental affairs activities related to
22 opioid or pain medication prescribing
23 guidelines.

24 Again, that's another topic that

1 you're designated to testify here on today?

2 A. It is.

3 Q. Okay. And what lobbying efforts
4 or governmental activities, if any, has J&J
5 engaged in concerning opioid or pain
6 medication prescribing guidelines?

7 A. You know, I'm aware of us being
8 supportive, you know, of things that restrict
9 use to avoid, you know, misuse and diversion
10 and things like that and -- you know, as long
11 as it's balanced with appropriate access.

12 So generally I know that, you
13 know, that's been our position, both federal
14 and state level.

15 Q. But in -- other than just
16 general support --

17 A. Um-hmm (affirmative).

18 Q. -- are there specific efforts or
19 activities that J&J has undertaken in
20 connection with opioid or pain medication
21 prescribing guidelines?

22 MR. GALIN: Objection to scope.

23 THE WITNESS: Not that I'm
24 specifically aware of, no.

1 BY MR. ACKERMAN:

2 Q. And just to be clear, are there
3 specific lobbying efforts or governmental
4 affairs activities that J&J has undertaken in
5 connection with opioid or pain medication
6 prescribing guidelines?

7 MR. GALIN: Objection to scope.

8 MR. ACKERMAN: Can I ask how
9 that's outside the scope?

10 MR. GALIN: Just the inclusion
11 of pain, because I don't know if there have
12 been -- we prepared this witness, and my
13 understanding is the topic was on -- related
14 to your opioids.

15 And, as you may -- I'm sure
16 you're aware Johnson & Johnson has a larger
17 pain franchise, which includes, for example,
18 Tylenol with acetaminophen. I just don't know
19 if there have been guidelines that we've
20 participated in nor have we prepared the
21 witness on any of those guidelines.

22 MR. ACKERMAN: Okay. Let's just
23 clarify this real quick.

24

Highly Confidential - Subject to Further Confidentiality Review

Page 116

1 (Thereupon, J&J-Cartwright
2 Deposition Exhibit Number 11 was marked
3 for identification.)

4 BY MR. ACKERMAN:

5 Q. The court reporter has marked
6 Exhibit Number 11, which is a document
7 entitled Defendants Johnson & Johnson, Janssen
8 Pharmaceuticals, Inc., Ortho-McNeil-Janssen
9 Pharmaceuticals, Inc. and Janssen
10 Pharmaceutica, Inc. Objections to Topics in
11 Plaintiffs' Notice of Videotaped 30(b)6
12 Depositions.

13 And turn to page 23. That's
14 where topic 25 is located. And then 25(i)
15 says, Opioid or pain medication prescribing
16 guidelines.

17 MR. ACKERMAN: So I just want to
18 clarify, is it your position that the witness
19 was only prepared with respect to opioid
20 prescribing guidelines?

21 MR. GALIN: It's our position
22 that, consistent with our response to number
23 25, that we prepared the witness on pain
24 management involving opioids and opioids, not

1 every guideline that may not affect or be
2 impacted by this litigation.

3 So, for example, I don't know
4 sitting here today -- and I'm assuming the
5 witness doesn't -- whether or not there was
6 topics involving the use of Tylenol, which in
7 theory, based on your topic, ignoring our
8 response, could be included. But on topics
9 associated with opioids and pain guidelines
10 that considered opioids, we did prepare the
11 witness.

12 MR. ACKERMAN: So to the extent
13 there were guidelines that concerned opioids,
14 the witness was prepared on them --

15 MR. GALIN: Correct.

16 MR. ACKERMAN: -- is that --
17 that's -- okay.

18 MR. GALIN: Correct.

19 MR. ACKERMAN: All right. Thank
20 you for -- all right. I'm glad we clarified
21 that.

22 BY MR. ACKERMAN:

23 Q. So with that clarification -- I
24 don't remember whether I asked the question

1 yet or not, but I'll -- we'll just do it again
2 and start over.

3 Did J&J engage in any lobbying
4 efforts or governmental affairs activities in
5 connection with opioid or pain medication
6 prescribing guidelines that referenced or
7 related to opioids?

8 A. And so beyond, you know, general
9 activity around, you know, opioids and
10 monitoring and tracking bills that might have
11 touched on, you know, prescribing -- you know,
12 requirements for prescribers and things like
13 that, no.

14 Q. Okay. You say -- you reference
15 monitoring and tracking bills.

16 A. Um-hmm (affirmative).

17 Q. Does that mean bills that are
18 introduced in -- does that include bills that
19 are introduced in state legislatures?

20 A. Yes. Sorry. Yes.

21 Q. And did Janssen engage -- did
22 J&J engage in any lobbying concerning bills
23 that were introduced in state legislatures?

24 A. Well, any bills?

1 Q. Well, I'm sorry. Related to the
2 prescribing of opioids.

3 A. So not -- we did not
4 specifically lobby around bills that were
5 related to prescribing guidelines, no.

6 Q. Are there any other -- other
7 than specifically lobbying, are there other
8 governmental affairs activities that Janssen
9 engaged in in connection with bills that were
10 introduced in state legislatures concerning
11 prescribing of opioids?

12 A. I'm sorry. Can you repeat that?

13 Q. Yeah, let me just give you the
14 document. It's easier.

15 A. Okay.

16 (Thereupon, J&J-Cartwright
17 Deposition Exhibit Number 12 was marked
18 for identification.)

19 THE WITNESS: Thank you. Okay.

20 BY MR. ACKERMAN:

21 Q. The court reporter has handed
22 you what's been marked as Exhibit 12. It is
23 an E-mail with the Bates number
24 JAN-MS-03000683.

Highly Confidential - Subject to Further Confidentiality Review

Page 120

1 Take a moment to review this
2 document. Let me know if you've seen it
3 before.

4 A. Okay.

5 Q. Okay. Have you seen this
6 document before?

7 A. I have not.

8 Q. If you look at the bottom of the
9 first page, it says opioid -- oh, I'm sorry --
10 it says Ohio Prescription Drug Abuse Task
11 Force.

12 Do you see that header?

13 A. I do.

14 Q. And then when you flip the page
15 over, there is a line that says -- it's the
16 third bullet point -- Gordon continues to work
17 with Zach, lobbyist to leverage an opportunity
18 to present nonbranded resources such as
19 Prescribe Responsibly to the Task Force.

20 Do you see that?

21 A. I do.

22 Q. What is Prescribe Responsibly?

23 A. So I know that we, J&J, had sort
24 of nonbranded educational materials about the

Highly Confidential - Subject to Further Confidentiality Review

Page 121

1 safe use of -- of prescription products. I
2 don't specifically know Prescribe Responsibly,
3 but I believe it may have been related to some
4 of those nonbranded educational materials.

5 Q. Okay. Do you know whether J&J
6 or anyone acting on J&J's behalf presented
7 prescribe responsibly to the Ohio Prescription
8 Drug Abuse Task Force?

9 A. So I know that we do, when the
10 opportunity presents itself, try to educate
11 on, you know, different aspects of -- of our
12 products, including, you know, things like
13 responsible prescribing. So I don't know
14 specifically whether, you know, this Ohio
15 Prescription Drug Abuse Task Force received
16 such a presentation, but I do know that that
17 is the kind of work that people within J&J
18 would do, to go out and try to educate about
19 those kinds of things.

20 Q. Sure. And they are educating
21 individuals who hold positions in governments;
22 is that correct?

23 A. They could be.

24 Q. Is -- is that education run from

Highly Confidential - Subject to Further Confidentiality Review

Page 122

1 the governmental affairs department of J&J?

2 A. In many cases, yes. But it
3 could -- you know, it's -- it's a very big
4 company with a lot of different components,
5 and so it could also be done by, you know, the
6 strategic customer group, for example, or, you
7 know, others besides government affairs and
8 policy.

9 Q. So in Ohio, did J&J provide any
10 presentations to -- or educational
11 presentations to the Ohio Prescription Drug
12 Abuse Task Force?

13 A. I know that we partnered with
14 the Ohio State Medical Association around
15 education around like a -- it was an Ohio bill
16 around pill mills. So I know that there were
17 efforts in Ohio to provide education about,
18 you know, new requirements, new restrictions
19 and things like that.

20 I don't specifically know, you
21 know, what this is referring to in, you know,
22 November of 2010 with the Ohio Prescription
23 Drug Abuse Task Force.

24 Q. Can you describe -- you -- you

Highly Confidential - Subject to Further Confidentiality Review

Page 123

1 mentioned a partnership with the Ohio State
2 Medical Association.

3 A. Um-hmm (affirmative).

4 Q. What -- can you describe more
5 detail about that, please?

6 A. So I -- I know you previously
7 asked me about an Ohio bill related to -- I
8 can't remember how you characterized it,
9 but -- but there was an Ohio bill that I think
10 of as like a pill mill bill that was, you
11 know, put in place to restrict and -- and
12 place some, you know, requirements around pain
13 clinics' prescribing practices to connect
14 prescribers up to a reporting system, things
15 like that.

16 And I know that we partnered
17 with the Ohio State Medical Association and
18 another group to provide education, because
19 there was a concern that there would be, you
20 know, this unintended consequence of
21 prescribers thinking, you know, I'm going to
22 stop prescribing altogether, even when
23 appropriate, because of, you know, concerns
24 about these new requirements and restrictions.

1 I think there was even a potential fine of,
2 you know, \$5,000 for prescribers. So we
3 wanted to make sure that people, you know,
4 understood the restrictions and exactly, you
5 know, how they were in place, but you could
6 deal with them responsibly.

7 So I know there were efforts
8 like that, but I don't know specifically what,
9 you know, this E-mail is referring to.

10 Q. Those efforts that -- the
11 education that was provided was -- to whom was
12 that education provided?

13 A. I'm not exactly sure the full
14 universe, but I believe it was targeted
15 towards prescribers and people in the
16 healthcare field.

17 Q. Okay. Did Janssen's partnership
18 with the Ohio State Medical Association
19 involve providing education to any individuals
20 in -- in the Ohio government?

21 A. I don't specifically know, you
22 know, who was, you know, accessing the
23 educational materials.

24 Q. Okay. At J&J are there

Highly Confidential - Subject to Further Confidentiality Review

Page 125

1 different individuals responsible for federal
2 government activities than are responsible for
3 state government activities?

4 A. Yes.

5 Q. And between the states, are
6 there -- are specific states assigned to
7 specific individuals?

8 A. Yes.

9 Q. Who is the governmental affairs
10 person at J&J who was assigned to Ohio efforts
11 in 2010?

12 A. I believe it was Richard Ponder.

13 Q. Is Richard Ponder still with the
14 company?

15 A. He is.

16 Q. And did you speak with Richard
17 Ponder in preparation for this deposition?

18 A. I know my counsel had multiple
19 conversations with him --

20 Q. Okay.

21 A. -- to aid my preparation.

22 Q. Did Mr. Ponder provide any
23 information regarding activities J&J
24 undertook, governmental activities J&J

1 undertook in the state of Ohio?

2 MR. GALIN: Can we just -- can I
3 interject for just one second?

4 MR. ACKERMAN: Um-hmm
5 (affirmative).

6 MR. GALIN: I -- I -- I just --
7 you can tell me if you want me to dismiss the
8 witness for this or not, but I just want to
9 clarify that I think the witness may be
10 mistaken about something. And so I -- I don't
11 want you to waste your time going down a
12 rabbit hole unnecessarily.

13 MR. ACKERMAN: Got it.

14 MR. GALIN: So I'm happy to
15 share that now, happy to share it --

16 MR. ACKERMAN: Why don't you go
17 ahead and share it now.

18 MR. GALIN: Okay.

19 Mr. Ponder was not the
20 individual responsible for Ohio. That's why I
21 think she confused your O states. He was
22 Oklahoma.

23 THE WITNESS: Oh, I did. I did.

24 MR. GALIN: And I have

1 represented Mr. Ponder in a deposition on
2 lobbying efforts in the state of Oklahoma, so
3 while I do have information on that, it is not
4 the information relevant to this and he was
5 not the person who we shared.

6 And, while we did provide the
7 witness and educated her on certain Ohio
8 activities and it's clear she can't remember
9 at the moment the name, I'm -- I'm sure you
10 have the documents with the name -- happy --
11 and follow up in a meet and confer to discuss
12 if you need names, but I just don't want you
13 to waste your time on the Ponder issue because
14 that's --

15 MR. ACKERMAN: Okay.

16 MR. GALIN: -- not the right
17 person.

18 MR. ACKERMAN: Okay.

19 BY MR. ACKERMAN:

20 Q. So what other activities did --
21 governmental activities did J&J undertake in
22 the state of Ohio?

23 A. Just generally or?

24 Q. In -- in connection with opioid

1 or pain medication prescribing.

2 A. So, you know, I'm aware of the
3 efforts around the -- the pill mill bill. And
4 then I believe, as if -- with any state, you
5 know, just ongoing monitoring and tracking of
6 various bills and proposals that were, you
7 know, moving related to opioids.

8 Q. Okay. Are you familiar with the
9 acronym OARRS?

10 A. I am.

11 Q. Okay. What is OARRS?

12 A. I -- so I know it's the Ohio Rx
13 reporting system. I'm going to -- I think I'm
14 missing another A. I am not sure what the A
15 was, but it's something like that, right?

16 Q. Yeah. It's -- I think -- I
17 think it's automated.

18 A. Okay.

19 Q. Right.

20 A. Okay.

21 Q. Did Janssen undertake any
22 governmental activities or lobbying in
23 connection with the legislation that
24 established the OARRS system?

1 A. I believe that we provided some
2 comments for consideration on the language as
3 it was being -- being developed.

4 Q. And who at Janssen provided
5 those comments?

6 A. You know, I don't know who would
7 have formally sort of submitted them, but I
8 know that anytime anyone from government
9 affairs and policy is working on something
10 like that, they would consult, you know,
11 medical affairs, safety, you know, people
12 who've -- who've been clinicians or people in
13 our clinical group to get input on, you know,
14 how to make whatever, you know, system or
15 strategy most effective.

16 Q. Let me ask the question a
17 different way.

18 If I was looking for those
19 comments, how would I find them?

20 A. I don't even know that they --

21 MR. GALIN: Objection.

22 Go ahead.

23 THE WITNESS: Sorry.

24 I -- I don't even necessarily

1 know that they would have been written. You
2 know, they might have been communicated in a
3 meeting orally, you know, so I think that
4 would be a -- a pretty big undertaking --

5 BY MR. ACKERMAN:

6 Q. Okay.

7 A. -- given the time frame, but --

8 Q. And who were the individuals at
9 J&J who were responsible for communicating
10 those comments, whether they be written or
11 oral?

12 A. I don't know exactly who would
13 have been responsible. I would start with
14 whoever was covering the state of Ohio for
15 that time period.

16 Q. Okay.

17 A. Whose name we've established I
18 do not recall.

19 MR. ACKERMAN: Counsel, if you
20 can just provide me with that name after the
21 deposition, I think that's fine.

22 MR. GALIN: Yes.

23 MR. ACKERMAN: All right.

24 Let's take a break.

1 VIDEO OPERATOR: The time is now
2 11:57 a.m. We're going off the record.

3 (Thereupon, a brief recess was
4 taken.)

5 VIDEO OPERATOR: The time is now
6 12:16 p.m. We are back on the record.

7 MR. ACKERMAN: Okay. I'm going
8 to mark this one as the next exhibit number,
9 which I think is probably 12 or 13, but I've
10 lost count.

11 MR. GALIN: 13, I believe.

12 (Thereupon, J&J-Cartwright
13 Deposition Exhibit Number 13 was marked
14 for identification.)

15 BY MR. ACKERMAN:

16 Q. Ms. Cartwright, the court
17 reporter has handed you Deposition Exhibit 13,
18 which is an E-mail Bates-numbered
19 JAN-MS-00940860 to -861.

20 Take a minute to look at this
21 document. Let me know when you've had a
22 chance to review it.

23 A. Sorry.

24 Q. Oh.

Highly Confidential - Subject to Further Confidentiality Review

Page 132

1 A. I'm ready.

2 Q. You've reviewed it?

3 A. Yes.

4 Q. Okay. Great.

5 A. Okay.

6 Q. So before the break you were
7 talk -- you were testifying a little bit about
8 the Ohio pill mill bill and we had a bit of
9 confusion as to who was responsible for the
10 state of Ohio. I think this document may help
11 us here. The name at the top is Bert Wickey.

12 Do you see that?

13 A. I do.

14 Q. And who is Mr. Wickey?

15 A. He was an HPAD, so a health
16 policy and advocacy director in the strategic
17 customer group.

18 Q. Okay. And was Mr. Wickey the
19 individual at J&J who was responsible for
20 state governmental affairs for Ohio?

21 A. I don't believe so, because the
22 strategic customer group is separate than
23 state government affairs --

24 Q. Okay.

1 A. -- but he may have had some
2 involvement in Ohio.

3 Q. Understand.

4 If you turn to the -- the second
5 page, the E-mail at the bottom is from
6 Kimberly Deem-Eshleman and it says, Bert, just
7 checking in to see if you got the Prescribe
8 Responsibly binder from Maury Sullivan and
9 when exactly is your meeting with the state of
10 Ohio?

11 Do you see that?

12 A. I do.

13 Q. Are you aware whether Bert
14 Wickey actually met with individuals from the
15 state of Ohio?

16 A. I'm not specifically aware.

17 Q. Okay.

18 A. I mean, I know we -- you know,
19 people in his type of role might meet with
20 people who work for the state, but I don't
21 know about the specific meeting that's being
22 discussed.

23 Q. Okay. Turning back to the --
24 the first page in the E-mail header, there's

1 another name there, Gordon Rosenberry.

2 Do you see it?

3 A. Yes.

4 Q. It looks like the last name in
5 the cc line.

6 A. Yes, I do.

7 Q. Do you know who Mr. Rosenberry
8 is?

9 A. He is a member of the state
10 government affairs team.

11 Q. Okay. And was he the individual
12 with responsibility for Ohio state government
13 affairs?

14 A. I'm not exactly certain,
15 particularly not in 2011.

16 Q. Okay. Thank you.

17 That concludes questioning with
18 respect to topic 25. There is one topic left
19 for which you've been designated to testify,
20 but I think we may have already covered it, so
21 let's see what we can do.

22 Topic 26 is Your communications,
23 meetings, lobbying and/or government affairs
24 activities with CMS between 1999 and 2006

1 related to the development, design, approval
2 and implementation of the Medicare
3 Prescription Drug Benefit Program, Part D.

4 And I truncated that a little,
5 but -- to try to cut out some of the legalese.

6 You understand that that is a
7 topic on which you've been designated to
8 testify here today?

9 A. I do.

10 Q. Okay. You already had
11 described, I believe generally, some of the
12 company's efforts with respect to Part D,
13 correct?

14 A. Yes.

15 Q. Were there any additional
16 efforts related to communications with CMS
17 regarding the development, design, approval
18 and implementation of the Part D program?

19 A. I believe there would have been
20 additional, you know, outreach and meetings
21 and engagement with CMS, but on the same
22 topics we previously discussed.

23 Q. Okay.

24 A. So around, you know, formularies

Highly Confidential - Subject to Further Confidentiality Review

Page 136

1 and therapeutic classes and things like that.

2 Q. And, again, were any of the
3 communications or outreach to CMS related to
4 Part D specific to opioids?

5 A. Not that I'm aware of.

6 Q. Okay. All right. That is it.

7 MR. ACKERMAN: I have no further
8 questions.

9 MR. GALIN: I'm just going to
10 ask a couple of questions just for the sake of
11 clarifying the record a bit.

12 MR. ACKERMAN: Do you want -- do
13 you want to switch seats? Do --

14 MR. GALIN: I'm okay staying
15 here if that's okay with you.

16 MR. ACKERMAN: That's fine.

17 MR. GALIN: I don't particularly
18 expect to take much time, but I just wanted --

19 EXAMINATION BY COUNSEL FOR DEFENDANTS

20 JANSSEN AND JOHNSON & JOHNSON

21 BY MR. GALIN:

22 Q. Ms. Cartwright, I really just
23 wanted to ask really about -- earlier today
24 you testified when you were discussing your

1 prep that you spoke with several individuals,
2 including Jennifer Thomas, correct?

3 A. Yes.

4 Q. Okay. And I believe when
5 Mr. Ackerman asked you why you testified -- or
6 what subjects, I should say, you discussed
7 PhRMA dues and donations; is that correct?

8 A. Yes.

9 Q. Okay. Mr. Ackerman also asked
10 you about how you would go about figuring out
11 the amount of dues by year.

12 Do you recall that?

13 A. I do.

14 Q. Is that something that you tried
15 to do in preparation for your deposition
16 today?

17 A. Yes. Ms. Thomas tried to pull
18 that information together, and it was
19 surprisingly complicated to figure out, I
20 think in part because there were multiple
21 systems, including reports back from PhRMA,
22 reports from her, looking at, you know, what
23 was paid quarterly and -- and -- and different
24 things. And so it was surprisingly

Highly Confidential - Subject to Further Confidentiality Review

Page 138

1 challenging to determine exactly -- the -- the
2 exact amount of dues we had paid for a
3 particular year.

4 And so Ms. Thomas, you know,
5 established from -- from her efforts that we,
6 you know, have paid over \$30 million in 2018,
7 that, you know, prior to that it was around
8 \$20 million, and it has, you know, continued
9 to increase.

10 Q. Okay. That's the only question.

11 MR. GALIN: Those are the only
12 questions I had. It was one question in
13 subparts.

14 MR. ACKERMAN: Sure.

15 MR. GALIN: That's -- that's all
16 I had.

17 VIDEO OPERATOR: The time is now
18 12:24 p.m. This concludes today's deposition.
19 We're going off the record.

20 (Thereupon, signature having
21 not been waived, at 12:24 p.m. the
22 deposition concluded.)

23

24

Highly Confidential - Subject to Further Confidentiality Review

Page 139

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24

CERTIFICATE OF DEPONENT

I, Carla Cartwright, do hereby certify that
I have read the foregoing pages, 7 through 138,
inclusive, which contain a correct transcript of the
answers given by me to the questions propounded to me
herein, except for changes, if any, duly noted on the
enclosed errata sheet.

WITNESS

Sworn and subscribed to before me this ____
day of _____, 2019.

My commission expires:

Notary Public:

Highly Confidential - Subject to Further Confidentiality Review

Page 140

1 CASE: In Re: National Prescription Opiate
Litigation

2

DEPOSITION OF: Carla Cartwright

3

TAKEN: January 17, 2019

4

5	PAGE	LINE	ERROR	CORRECTION	REASON
---	------	------	-------	------------	--------

6					
---	--	--	--	--	--

7					
---	--	--	--	--	--

8					
---	--	--	--	--	--

9					
---	--	--	--	--	--

10					
----	--	--	--	--	--

11					
----	--	--	--	--	--

12					
----	--	--	--	--	--

13					
----	--	--	--	--	--

14					
----	--	--	--	--	--

15					
----	--	--	--	--	--

16					
----	--	--	--	--	--

17					
----	--	--	--	--	--

18					
----	--	--	--	--	--

19					
----	--	--	--	--	--

20					
----	--	--	--	--	--

21					
----	--	--	--	--	--

22					
----	--	--	--	--	--

23					
----	--	--	--	--	--

Witness

24					
----	--	--	--	--	--

CERTIFICATE OF NOTARY

I, MISTY KLAPPER, the officer
before whom the foregoing deposition was
taken, do hereby certify that the witness
whose testimony appears in the foregoing
deposition was duly sworn by me; that the
testimony of said witness was taken by me in
shorthand and thereafter reduced to
typewriting by me; that said deposition is a
true record of the testimony given by said
witness; that I am neither counsel for,
related to, nor employed by any of the parties
to the action in which this deposition was
taken; and, further, that I am not a relative
or employee of any attorney or counsel
employed by the parties hereto, nor
financially or otherwise interested in the
outcome of this action.

Misty Klapper

Notary Public in and for
the District of Columbia